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Spirituality and Self-Efficacy in Counseling and Social Work Trainees

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**SPIRITUALITY AND SELF-EFFICACY IN
COUNSELING AND SOCIAL WORK TRAINEES**

**SPIRITUALITY AND SELF-EFFICACY
IN COUNSELING AND SOCIAL WORK TRAINEES**

**A dissertation submitted in partial fulfillment
of the requirements for the degree of
Doctor of Philosophy
in Counselor Education**

By

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Table of Contents

CHAPTER 1: INTRODUCTION.....	1
Statement of the Problem.....	2
Background.....	3
<i>Theoretical Framework</i>	4
<i>Humanistic Theory</i>	4
<i>Transpersonal and Wellness Theories</i>	5
<i>Self-efficacy Theory</i>	7
<i>Ethical Considerations</i>	7
<i>College Student Development</i>	8
<i>Counseling and Social Work Trainee Development</i>	9
Purpose of the Study	12
Research Questions.....	14
Significance of the Study	15
Scope of the Study	16
Limitations of the Study.....	17
Delimitations of the Study	17
Definition of Terms.....	18
CHAPTER 2: LITERATURE REVIEW	21
Spirituality and Religion.....	21
<i>Spirituality</i>	23
<i>Religion</i>	24
<i>Cultural Awareness</i>	25

Theory	27
<i>Humanistic Theory</i>	27
<i>Transpersonal and Wellness Theories</i>	28
<i>Empirical Research</i>	30
Self-efficacy	31
<i>Theory</i>	32
<i>Empirical Studies</i>	32
<i>College Student Development</i>	33
<i>Counselor and Social Work Trainee Development</i>	34
Recognition of the Issue	37
<i>Diagnostic Tools</i>	38
<i>Counselor Perceptions</i>	38
<i>Precautions and Dangers</i>	40
Summary	40
CHAPTER 3: METHODOLOGY	43
Purpose of the Study	43
Participants	44
Instruments	47
<i>Religion/Spirituality Awareness Survey</i>	47
<i>Counselor Self-efficacy Scale</i>	49
<i>Psychomatrix Spirituality Inventory</i>	50
<i>Pilot Study</i>	55
<i>Web-based Survey</i>	56

Data Analysis	58
Limitations of the Study.....	60
Delimitations of the Study	60
CHAPTER 4: RESULTS.....	62
Demographics	62
Reliability of Instruments	66
<i>Religion/Spirituality Awareness Survey</i>	66
<i>Counseling Self-efficacy Scale</i>	67
<i>Psychomatrix Spirituality Inventory</i>	68
Research Questions.....	69
<i>Research Questions 1 - 3</i>	70
<i>Research Questions 4 - 6</i>	72
<i>Training/Accreditation Program Affiliation</i>	72
<i>Gender</i>	73
<i>Ethnicity</i>	73
<i>Religion/Spiritual Affiliation</i>	74
<i>Age</i>	75
CHAPTER 5: DISCUSSION.....	80
Summary and Discussion.....	80
<i>Research Questions 1 - 3</i>	80
<i>Research Questions 4 - 6</i>	81
<i>Training/Accreditation Program Affiliation</i>	82
<i>Gender</i>	82

<i>Ethnicity</i>	83
<i>Religion/Spiritual Affiliation</i>	84
<i>Age</i>	86
Conclusions.....	87
Limitations of the Study.....	89
Implications for Counseling and Social Work.....	90
Recommendations for Further Research.....	92
REFERENCES	94
APPENDIXES	108
Appendix A.....	109
Appendix B	111
Appendix C	114
Appendix D.....	115
Appendix E	117
Appendix F.....	130
Appendix G.....	131
Appendix H.....	134
Appendix I	135
Appendix J	139

CHAPTER 1: INTRODUCTION

Research has pointed to spiritual and religious issues as relevant therapeutically and ethically in counseling and counselor self-awareness (Burke & Hackney, 1999). Many counselors may have hesitated to discuss spirituality issues in a counseling context out of fear or ignorance (Chandler, Holden, & Kolander, 1992). As a result, counselor training typically has not included religious or spiritual issues, (Constantine, 1999; Kelly, 1995; Matthews, 1998) and counselor self-efficacy around these issues may have suffered (Bandura, 1986).

Spiritual and religious issues for clients have been acknowledged through the diagnostic process. The American Psychiatric Association (APA) *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision*, (2000), (*DSM-IV-TR*) presented many possible diagnoses represented in clients. Included are: a) phase of life problem, b) relational problem, c) identity problem, d) academic problem, and e) religious or spiritual problem (APA, 2000). In 1994, the *DSM-IV*, V62.89, described the category of Religious and Spiritual Problem and illuminated this concern as a focus for counseling (Lukoff, Lu, & Turner, 1998). When a counselor specifically identifies distressful experiences of loss, spiritual values, questions of faith, and purpose in life, which are not necessarily attached to organized religion, the category of Religious or Spiritual Problem may be used (APA, 2000). In 1933, Jung asserted that all human problems are spiritual, and that some spiritual awakening was a part of the healing process for addressing human dilemmas. Jung (1958) later stated that there is an instinctive movement in the human psyche towards integration, wholeness, and health.

Statement of the Problem

Burke and Miranti (1995) related that counselors must be comfortable with their own spiritual or religious beliefs, or biases, as they work with clients, and be prepared to deal with what exists for the client in search of understanding and growth. Self-efficacy has been identified through research as a cognitive variable in the successful development of new skills and abilities (Bandura, 1986, 1995; Kernis, 1995). Counseling trainees enter graduate level courses to master the skills, knowledge, and personal development necessary for adequate counseling performance (Rushlau, 1998). As trainees gain more experience and develop counseling skills, their self-efficacy gains strength. Bandura (1989) developed the self-efficacy theory that suggested performance of a behavior or task, in addition to knowledge and skills, requires belief in one's ability to produce desired outcomes. Research has indicated that practicing counseling skills and subsequent quality of those skills influenced the counselor's level of self-efficacy (Bandura, 1995; Maddux & Stanley, 1986).

The lack of research focusing on counselor levels of spirituality, awareness, and self-efficacy in dealing with religious and spiritual issues in counseling may relate to the historical view of its inappropriateness in counseling (Miller, G., 1999). For many years mental health professionals have addressed diversity issues of gender, ethnicity, and sexual orientation. These same professionals have now been encouraged to approach spiritual issues within the context of counseling (Canda & Furman, 1999).

Souza (2002) suggested that spirituality be considered a form of client diversity, recognized as coping skills for some clients, and taught in counselor education programs by providing a variety of definitions so as not to seem dogmatic. Spero (1985) suggested

that the counselor/client relationship could falter if the therapist failed to recognize the value of religion and spirituality for the client. According to Myers (1991), in developing goals of wellness for clients, counselors must be willing to address their own issues and become aware of how their beliefs and philosophy may influence the client. She also reiterated the thought that we cannot take others past where we have gone within our own development.

Young, Cashwell, Wiggins-Frame, and Belaire (2002) studied 94 Council for Accreditation of Counseling and Related Educational Programs (CACREP) accredited counselor education programs and found that 69% addressed religious and spiritual issues while only 46% of the faculty surveyed viewed themselves as prepared to include spiritual and religious issues in their teaching and supervision.

Background

The concept of the spirit or spiritual has been discussed for centuries. Ken Wilbur (2000), in discussing the origins of psychology, shared definitions of the *psyche*, which means mind or soul, and can be alternately described as self with the subjectivity of a higher self or spiritual self. Wilbur determined that the roots of psychology, as far back as the 1800s, grew from eastern thought regarding a mystic universal spirit and spiritual traditions. He suggested that psychology include body, mind, and spirit with movement towards consciousness (Wilbur, 2000). This integral perspective was inclusive of knowledge from Western and Eastern thought, metaphysical and scientific, religious and secular, from ancient to contemporary times (Marquis, Holden, & Warren, 2001).

Theoretical Framework

Humanistic Theory. Many theories or approaches that have been taught in counselor education refer to issues of spirituality and self-awareness. The leading founders of humanistic psychology, Abraham Maslow, Rollo May, and Carl Rogers, attended lectures or seminars by Alfred Adler (Ansbacher, 1990), who emphasized human development as evolving and as a struggle for perfection (Adler, 1964). Maslow (1968) described “self-actualizing” people as being more aware and comfortable with reality, no longer slaves to fears, and more comfortable with the unknown, thus living their lives more efficiently. May (1968) saw the human situation as a disharmony within the person and the world. The resulting possibility of an attempt to escape this disharmony in search of self-actualization pointed to a psychological or religious issue. Rogers (1980), in his theory of person-centered therapy, described a tendency of human beings for moving toward greater order, complexity, and interrelatedness.

The component that bound these theories and approaches to counseling and spirituality was the emphasis on the self. Adler’s holistic emphasis seemed to connect on many levels with the humanistic view of psychology (Ansbacher, 1990). In humanistic psychology, the psychologists included themselves in the population of humanity that emphasized validation with the client. Realizing that the therapist was in relationship with the client, each perspective was taken into account along with the emotional frame of reference of the client (Obuchowski, 1988). Ingersoll (1994) encouraged counselors to become familiar with: (a) resources that described various spiritual traditions, beliefs, and practices; (b) what made life worth living for a client that was struggling to understand

and develop her/his spirituality; and (c) the development of spirituality as a possible construct of human development.

Transpersonal and Wellness Theories. Witmer and Sweeney (1992) related that the concept of wellness described the total person, and was a positive and progressive approach in increasing quality of life. DeHoff (1998), in her discussions on pastoral counseling, suggested that Maslow (1954) and Tillich (1963) contributed to the exploration of the psyche-spirit connection and human growth. "There is a point at which psyche and spirit, psychotherapy and spiritual direction meet: the place of healing" (p. 333).

As people search for understanding and meaning in their lives, religious and spiritual perspectives may become more important. Myers (1991) suggested that wellness was a goal not only for the client but for the counselor as well and proposed a wellness model for counseling "as a basic element in counseling and development" (p. 183). Others have defined wellness as "the process and state of a quest for maximum human functioning that involves the body, mind, and spirit" (Archer, Probert, & Gage, 1987, p. 311) and "a conscious and deliberate approach to an advanced state of physical and psychological/spiritual health" (Ardell, 1988, p. 5).

Pearson, Shavlik, and Touchton (1989) urged counselors to become more aware of the effects of gender that are related to religion, race, and sexual orientation in order to be more effective in counseling. The differences in the way men express themselves and their beliefs were studied by Heesacker and Prichard (1992). They suggested the importance of counselors becoming more aware and accepting of gender differences with the use of more creative interventions for men that might include men's groups,

awareness of myth and archetypes, storytelling, understanding without prohibiting acting out, and therapeutic silence. Evans (2001) related that women built spiritual meaning into their lives, leading the way for new and varied experiences of spirituality by tailoring their practices to suit their needs with religious ceremony, meditation, yoga, and retreats. Strohl (1998) examined the effects of spirituality and consciousness on personal transformation and health and found deep ramifications for optimal levels of human functioning. Gotz (2001) suggested lives were connected spiritually with the material world and encouraged openness to the inclusion of spirit in all areas of life. Adams (1999) studied the integration of being, energy, life, and meaning in the world as part of one's self, similar to an understanding of compassion and the generation of love as each contributed to the other.

Eastern theories have addressed spirituality in terms of enlightenment and the integration of spiritual understandings in real life (Kornfield, 2000). Epstein (2001) discussed the role of meditation in psychotherapy and the process of change. He related that people have to learn how to be honest with and about themselves for healing to begin. Strohl (1998) suggested that transpersonal counseling was concerned with an active process of surrendering control within the self and that the counseling profession should address the influence of religious, spiritual, and ethical values on mental health and behavior. It has been important to be increasingly aware of counselor and client beliefs, values, and biases, as they are implicit in the counseling process. The knowledge and theory base for addressing spirituality in clients has been in existence for some time. As noted earlier, Eastern and Western approaches offered the foundations for addressing issues of self-esteem, coping, depression, anxiety, and possibly spirituality.

Self-efficacy Theory. Bandura's (1977) Social Learning Theory advocated the interconnectedness of behavior, personality, and environment. This theory suggested that learning occurred through the observation of others, which shortened learning periods and reflected complex integration of vicarious experiences. Bandura (1982) suggested that self-efficacy was gained through decreased emotional response, verbal encouragement, vicarious experiences, and mastery with positive accomplishments. Research has supported this theory of self-efficacy in counselor trainee professional development with studies in levels of experience (Sipps, Sugden, & Favier, 1988), expectations for supervision (Friedlander & Snyder, 1983), anxiety level and performance (Friedlander, Keller, Peca-Baker, & Olk, 1986).

Young, Cashwell, and Shcherbakova (2000) indicated that many counselors have an interest in addressing spirituality but report a lack of training and understanding of both theory and techniques for clinical practice. Pate and Bondi (1992) suggested that counselors and counselor educators must recognize the importance of, and gain the skills to deal with, religious and spiritual beliefs and values, as a component of client culture. Counselors may deprive clients of a sense of support or strength if spiritual values are neglected within the counseling process (Burke & Miranti, 1995).

Ethical Considerations. When counselors approach the inner spiritual or religious coping mechanisms of clients, the ethical boundaries of the counseling profession must be considered. The American Counseling Association (ACA) ethical guidelines urged members to respect value differences and to avoid value impositions or discrimination. Counselors and counselor trainees cannot enter into issues outside their expertise and are bound by ethical standards to know their limits and to do no harm (ACA, 1995). The

National Association of Social Workers (NASW) code of ethics for social work encouraged the enhancement of human well-being, and meeting peoples' basic human needs, with particular attention given to needs and empowerment of those vulnerable, oppressed, and poverty stricken (NASW, 1996).

College Student Development. The transition from undergraduate to graduate studies can be difficult. Developmentalists have recognized adolescent and adult transitions as significant periods of the life cycle (Sherrod, 1996). Choices of major importance are often made in the period of young adulthood that could alter previous coping skills and pathways for success (Pickles & Rutter, 1991). Developmental and educational approaches were often used in the treatment of stress because of disruptions in identity and trust (Marotta, 2000). When stress reaches higher levels, people tend to question their coping skills and belief systems, including religion and spirituality. It is important that counselors address the issues each client brings to the counseling setting in order to lessen the effects of stress, and encourage continued growth and self-awareness.

Spirituality and religion have played a developmental role as individuals formed values, beliefs, and meaning (Erikson, 1968). An individual's spiritual values affect perceptions and observations of events (McCullough & Worthington, 1995). Koch (1998) suggested a spiritual empowerment process of spiritual experience and awakening indicating a counselor client connection followed by the client awakening to their own spiritual power and its use.

Chickering and Reisser (1993) explained developmental change in the transition from late adolescence to young adulthood by incorporating many cognitive and psychosocial views into a comprehensive approach. They identified seven developmental

tasks or vectors to assist in determining direction and strength in an individual moving towards individuation. These vectors involved the development of: (a) a sense of intellectual, physical, and interpersonal competence; (b) the ability to know and own one's emotions; (c) interdependence; (d) mature interpersonal relationships; (e) one's own identity; (f) a sense of purpose; and (g) integrity inclusive of humanizing values, personalizing values, and congruence between personal and social values and behavior (Chickering & Reisser, 1993). As trainees transition through the developmental tasks, opportunities for learning and self-reflection may enhance progress and responsiveness to the needs of others (Glover, 2000).

Counseling and Social Work Trainee Development. The understanding of spirituality and the development of self-efficacy for the counseling trainee have been posited as vital and separate elements in training. The responsibilities of training, understanding spirituality and religiosity, and increased counselor self-efficacy have been relegated to the counselor, trainees, and the counselor educator. The above mentioned theories and ethical considerations have indicated the importance of spirituality and counselor training designed to enhance self-efficacy and personal awareness. Reinert and Bloomingdale (1999) reported that spiritual development and mental health were related, and deserved attention in counseling. They indicated that those who were spiritually growth-oriented tended to report less psychological distress than those who were spiritually underdeveloped or dogmatic about their beliefs. Genia (1997) suggested that spiritual maturity indicated a person's ability to tolerate uncertainty and establish a greater sense of well-being.

Professional organizations have suggested the importance of continued development and knowledge enhancement for students and professionals. CACREP (2001) standards encourage counseling students and counselors to enhance their knowledge in interpersonal and group skills through workshops and small group experiences. They also suggest systematic and ongoing evaluations from counselor education faculty regarding professional and personal development. One avenue for evaluating counselor development has been to measure self-efficacy related to the various competencies within the profession. Self-efficacy has been shown to predict future behaviors and the ability to achieve successful outcomes (Bandura, 1986; Ewart, 1995; Holden, 1991).

The American Counseling Association (ACA) was developed as a professional, educational, and scientific organization dedicated to enhancing human development across the life-span (Herlihy & Corey, 1996). The standards encourage a high quality of practice through a counseling relationship based on trust (ACA, 1995; Pope & Vasquez, 1991). Counselors have been trained to work with diverse populations and understand many theoretical approaches to counseling (Corey, 1996). Counselor Education, Rehabilitation Counseling and Counseling Psychology programs have offered training in counseling with emphasis in areas such as: (a) school counseling, (b) community agency or mental health counseling, (c) college counseling, and (d) career counseling. Each of these emphases has recognized the importance of the whole person throughout the developmental process (ACA, 1995).

Organizational divisions developed within ACA have acknowledged the importance of religious and spiritual issues in counseling. The Association for Spiritual,

Ethical and Religious Value Issues in Counseling (ASSERVIC) began in 1974 with members interested in spiritual, ethical, and religious values related to the development of an individual and counseling (Corey, Corey, & Callanan, 1998). Historically, some counselors have resisted the inclusion of religious or spiritual issues due to personal bias or lack of knowledge about various religious and spiritual thought (Burke & Hackney, 1999; Lovinger, 1979). Witmer and Sweeney (1992) suggested a wellness or holistic perspective in helping counselor trainees consider religion and spirituality as an inner resource useful in developing their personal and professional self.

Social Work education was established in 1890 with the intention of promoting the welfare of society and individuals through counseling, aid to the needy, ill, aged, and others seeking help and mental health services (Gibelman, 1999). The Social Work profession has grown to encompass many areas of human well-being including: (a) medical social work, (b) mental health counseling, (c) school and community social work, and (d) clinical private practice (NASW, 1996).

The Council on Social Work Education (CSWE, 2003) was developed to promote academic excellence in social work education with specified curricular content and educational context that prepare students for professional social work practice. The CSWE includes policies for education in accredited institutions that require objectives for content including theories and knowledge that focus on spiritual development across the life span.

Articles advocating religion and spirituality as legitimate aspects of social work practice appeared in literature in the late 1980s (Canda, 1988; Holland, 1989; Sanzenbach, 1989; Sheridan et al., 1992). Some social workers have joined an

independent organization called the North American Association of Christian Social Workers (NACSW), which supports the integration of Christian faiths into social work (Raphel, 2001). Other social workers have developed the Society for Spirituality and Social Work, dedicated to providing a place for dialogue and cooperation between religious and non-religious spiritual perspectives (NASW, 1996). Sermabeikian (1994) related that spirituality was virtually unexplored in social work. Six years later, Kamya (2000) published an article challenging social work educators and clinicians to take a closer look at the inclusion of spirituality in training and the need for further research.

Purpose of the Study

The purpose of this study was to explore the relationships of the counseling/social work trainee spirituality total factor score, factors of spirituality, and religion/spirituality awareness to self-efficacy in counseling clients with religious/spiritual issues and/or backgrounds. In addition, the study assessed the influence of demographic variables to trainee spirituality, awareness, and self-efficacy including: (a) religious/spiritual affiliation, (b) ethnicity, (c) training/accreditation program affiliation, (d) age, and (e) gender.

Research has shown the relevance and sporadic inclusion of religious and spiritual issues in counselor training (Constantine, 1999; Kelly, 1994, 1995; Matthews, 1998; Young et al., 2002). Some have suggested that counselors and counseling programs have not fully recognized the total being of clients and counselors when spirituality was not addressed in counseling and training (Burke & Hackney, 1999). Studies have separately addressed the need for training in religious/spiritual issues (Sheridan & Wilmer, 1994; Young et al., 2002) and counselor self-efficacy (Holden, 1991; Holden et al., 2002;

Johnson et al., 1989). No empirical studies reviewed addressed counselor/social work trainee spirituality and awareness in relation to self-efficacy and the relationship of selected demographics.

In this study, counseling and social work master's level trainees were surveyed to assess their self-efficacy, spirituality, and awareness levels as they entered into the last year or last two to three semesters or less of their training. The relationship of the factors of spirituality, denoted in the Psychomatrix Spirituality Inventory (Wolman, 2001), to self-efficacy included (a) Divinity: the sense of connection to a God figure or divine energy source; (b) Mindfulness: awareness of the interconnection of the mind and body, with an emphasis on practices that enhance that relationship; (c) Intellectuality: a cognitive, inquiring approach to spirituality, with a focus on reading and discussing sacred texts; (d) Community: the quality of spirituality enacting connection to the community at large, whether in charity or politics; (e) Extrasensory perception: spiritual feelings and perceptions associated with non-rational ways of knowing, including prophetic dreams and near-death experiences; (f) Childhood spirituality: a personal historical association to spirituality through family tradition and activity; (g) Trauma: a stimulus to spiritual awareness through experiencing physical or emotional illness or trauma to the self or loved ones (pp. 2-3).

Recognition of the possible relationships between trainee spirituality, awareness, and self-efficacy in this study may offer clearer understanding of the role of spirituality and self-efficacy in trainees and the importance of training in the areas of religion, spirituality, and self-awareness. In addition, counseling/social work trainees may benefit from exploring personal spirituality and religion/spirituality awareness and how it may

relate to self-efficacy in counseling clients with religious/spiritual issues or backgrounds. Evidence of positive relationships between spirituality, awareness, and self-efficacy may contribute to the improvement of education and training programs in personal development and knowledge with respect to the issues of religion and spirituality.

Research Questions

This study addressed the following research questions:

1. Does spirituality, as the PSI Total Factor Score, relate to the level of trainee self-efficacy in counseling clients with spiritual/religious issues and/or backgrounds?
2. Do each of the seven factors of trainee spirituality relate to trainee self-efficacy in counseling clients with spiritual/religious issues and/or backgrounds?
3. Does trainee religious/spiritual awareness relate to trainee self-efficacy in counseling clients with spiritual/religious issues and/or backgrounds?
4. Does trainee spirituality differ in relation to:
 - a) Religious/spiritual affiliation
 - b) Ethnicity
 - c) Training/accreditation program affiliation
 - d) Gender
 - e) Age
5. Does trainee self-efficacy differ in relation to the demographic variables listed in question four?
6. Does trainee religion/spirituality awareness differ in relation to the demographic variables listed in question four?

Significance of the Study

Spirituality and religion are significant aspects of development in many people's lives (Ellison, 1991; Worthington, 1989). Lack of acknowledgment and preparation for dealing with religious and spiritual issues in counselor training may, in some way, encourage counselor insensitivity to clients' religious and spiritual issues (Hinterkopf, 1994). Burke and Hackney (1999) emphasized the importance of recognizing religious and spiritual aspects of counselor personality, in order to decrease the chances of unconscious imposition of counselor values and beliefs onto clients. "The competent counselor is self-aware of his or her own spiritual/religious values and is sensitive to their operation in the counseling session" (Burke & Hackney, 1999, p. 254).

Although religion and spirituality have gained more attention in recent years, research has not addressed the trainees' levels of spirituality and awareness in relationship to counselor self-efficacy when dealing with these issues in counseling. Articles in Counseling and Social Work publications have separately revealed a growing interest in the subjects of counselor self-efficacy and religious and spiritual issues (Burke & Miranti, 1995; Jankowski, 2002; Kanya, 2000; Kelly, 1994; McCullough, Worthington, Maxey, & Rachal, 1996; Miller, 1999; NASW, 2000; Northcut, 2002; Pate & High, 1995; Sermabeikian, 1994). Studies have surveyed faculty, students, and governing associations about religion and spirituality training within programs (Burke & Hackney, 1999; Sheridan & Hemert, 1999; Sheridan & Wilmer, 1994; Young, Cashwell, Wiggins-Frame, & Belaire, 2002). Counseling and social work education programs have shown favorable support for the inclusion of training in religious and spiritual issues since 1994 (Miller, 1999; Sheridan & Wilmer, 1994). Counseling and social work

programs have not consistently implemented training in religion/spirituality due to low faculty self-efficacy in the areas of religion and spirituality (Sheridan & Wilmer, 1994; Young et al., 2002).

This study may be significant due to its inclusion of trainee spirituality, religion/spirituality awareness, and self-efficacy and their relationship to one another and selected demographics. This design explored the differences in training/accreditation program affiliation, religious/spiritual affiliation, ethnicity, age, and gender in order to recognize the influence of these demographics on the above variables. It was also important to understand the self-awareness of counseling/social work trainees and the confidence in their training in religious/spiritual issues. The information gained from this study may offer an opportunity for professionals, trainees, and educators to evaluate the impact and importance that counselor spirituality, awareness, and self-efficacy have on trainees in dealing with religious/spiritual issues and/or backgrounds in the counseling process.

Scope of the Study

This study focused on master's level counseling and social work students in CACREP and CSWE accredited programs. The relationship of trainee levels of spirituality and factors of spirituality to self-efficacy in dealing with religious and spiritual issues in counseling were examined. The relationship of trainee religion/spirituality awareness to trainee self-efficacy was also explored. Comparisons were made between training/accreditation program affiliation, religious/spiritual affiliation, ethnicity, age, and gender.

The participants in the study were master's level students in their final year/last three semesters or less of training. The Counselor Self-Efficacy Scale (CSES) (Baker, 1989; Johnson, Baker, Kopala, Kiselica, & Thompson, 1989) and the Psychomatrix Spirituality Inventory (PSI) (Wolman, 2001) were used as self-reporting instruments. Participants were asked to complete the self-efficacy scale with the counseling of religious/spiritual issues and backgrounds in mind in order to specifically measure this aspect of efficacy and training. There was a self-report survey designed by this researcher, Religion/Spirituality Awareness Survey (RSAS) (Matthews, 2003), to address knowledge, training, and awareness of specific religions/spiritual systems.

Limitations of the Study

The sample used in this research consisted of self-selected master's level students from CACREP and CSWE accredited institutions. Invitations for participation were e-mailed to professors in each program asking them to post the invitation for student participation on their program listserv or information boards. Students with computer access were able to click on the survey web address listed in the invitation to take the survey. The survey was anonymous with no way to track whether the professors posted the invitation unless the anonymous participants acknowledged a specific university. Web-based surveys limit access to those with Internet access and those willing to participate (Anderson & Kanuka, 2003).

Delimitations of the Study

The counseling behaviors listed in the Counselor Self-Efficacy Scale (Baker, 1989; Johnson, Baker, Kopala, Kiselica, & Thompson, 1989), were developed with counselor education trainees in mind. The behaviors were compared to the clinical

competencies of social work master's level students listed in a new self-efficacy measure developed by Holden, Meenaghan, Anastas, and Metrey (2002). The general behaviors were similar and appeared to be understandable for each discipline. An initial clarity and appropriateness study with 16 social work, counseling students, and professionals provided feedback about the structure and content of the surveys with positive results. The differing skills or training for different disciplines were not considered separately in surveys or statistical analysis.

Literature was extensively reviewed when selecting the spirituality measure. Of the many instruments, the Psychomatrix Spirituality Inventory (Wolman, 2001) met the researcher's criteria of being more spiritually oriented while taking religion into consideration. The PSI was determined to be the most inclusive instrument, for this study, providing descriptive and non-evaluative results of religious and spiritual experience with values differentiated by gender.

The Religion/Spirituality Awareness Survey (Matthews, 2003) was developed by this researcher to measure basic knowledge, training, and awareness of some major religions/spiritualities. The survey was more informational than evaluative in design and was not inclusive of all religions or spiritual disciplines.

Definition of Terms

For the purpose of this study, the following definitions applied:

1. *Awareness and Religion/Spirituality Awareness* referred to trainee knowledge, training, and cognizance of terms, beliefs, rituals, and customs related to various religions/spiritualities. The *Religion/Spirituality Awareness Survey* (Matthews, 2003) was used in this study to measure awareness as none, low, moderate, and high. None referred

to no knowledge or no training. Low referred to knowledge that the religion exists or training with incidental references to religion/spirituality in one or two classes. Moderate suggested that the participant can discuss some aspects of the religion but does not know or understand all terms, beliefs, rituals, or customs associated with the religion or in training there were more than two instances with class time dedicated to the topic that stimulated more study. High pertained to a strong conversational knowledge of terms, beliefs, rituals, and customs of the religion or training in at least one course dedicated to training regarding religion/spirituality.

2. *Religion* was defined as the “creedal, institutional, and ritual expression of spirituality that is associated with world religions and denominations” (Kelly, 1995, p. 4).

3. *Religious and Spiritual Problems or Issues* was defined as a category in the *DSM-IV-TR* focusing clinical attention on a religious or spiritual problem. Examples included “distressing experiences that involve loss or questioning of faith, problems associated with conversion to a new faith, or questioning of spiritual values that may not necessarily be related to an organized church or religious institution” (APA, 2000, p. 741).

4. *Self-Efficacy* was considered a cognitive variable in the successful development of new skills and abilities (Bandura, 1986, 1995; Kernis, 1995). Bandura (1977, 1982, 1986, 1989) developed the self-efficacy theory that suggested performance of a behavior or task, in addition to knowledge and skills, required belief in one’s ability to produce desired outcomes. Bandura’s (1977) theory suggested that self-efficacy was gained through decreases in emotional response, verbal encouragement, vicarious experiences, and mastery of positive accomplishments. In this study, self-efficacy levels were measured with the *Counselor Self-Efficacy Scale (CSES)* with items that assessed skills

typically used in counseling excluding theoretical approaches (Baker, 1989; Johnson et al., 1989) and with permission from the author, added emphasis by this researcher, on counseling clients with religious/spiritual issues or backgrounds.

5. *Spirituality*, according to Kelly (1995), was related as “a personal affirmation of a transcendent connectedness to the universe” (p. 4). In this study, levels of spirituality were defined by scores on the *Psychomatrix Spirituality Inventory (PSI)* as low, moderate, and high over seven factors of spirituality: (a) Divinity: the sense of connection to a God figure or divine energy source; (b) Mindfulness: awareness of the interconnection of the mind and body, with an emphasis on practices that enhance that relationship; (c) Intellectuality: a cognitive, inquiring approach to spirituality, with a focus on reading and discussing sacred texts; (d) Community: the quality of spirituality enacting connection to the community at large, whether in charity or politics; (e) Extrasensory perception: spiritual feelings and perceptions associated with non-rational ways of knowing, including prophetic dreams and near-death experiences; (f) Childhood spirituality: a personal historical association to spirituality through family tradition and activity; (g) Trauma: a stimulus to spiritual awareness through experiencing physical or emotional illness or trauma to the self or loved ones (Wolman, 2001, pp. 2-3).

6. *Trainee* was defined as a counseling, or social work student, in the last year/two or three semesters of a master’s level program, progressing toward competency in counseling. Trainees involved in this study were contacted through CACREP or CSWE accredited college or university programs for master’s level counselor education, rehabilitation counseling, counseling psychology, or social work.

CHAPTER 2: LITERATURE REVIEW

Introduction

This chapter presents a review of literature related to the spirituality, awareness, and self-efficacy of master's level counseling and social work trainees potentially addressing religion/spirituality issues or background with clients. The presentation of the literature addresses the importance of an understanding of spirituality and religion within the counseling field, research related to spirituality and self-efficacy, issues of cultural awareness and development, and applicable theory.

Spirituality and Religion

Spirituality is related to the total being of an individual and counselors must consider all aspects of the client in counseling (Burke & Hackney, 1999). Miranti and Burke (1995) advocated the development of well-prepared and sensitive professionals that are capable of addressing the challenging issues of religion and spirituality. Young, Cashwell, and Woolington (1998) have suggested that spirituality relates to the moral development and search for meaning or purpose in life for many students. Students and professionals have recognized the influence of spiritual and religious issues in their own lives and the need for increased awareness for self and their profession (Bullis, 1996; Canda & Furman, 1999).

Although many counselors have expressed interest in religion and spirituality as relevant in counseling and training (Faiver, Ingersoll, O'Brien, & McNally, 2001; Kelly, 1995; Sheridan & Hemert, 1999; Hodge, 2001), few programs have consistently developed training and supervision that include religion and spirituality (Kelly, 1994; Sheridan & Wilmer, 1994; Young et al., 2002). Social work clinicians and students have

reported concern that their education did not prepare them to address diverse issues of spirituality and religion (Canda, 1988; Dezerotes, 1995; Sheridan et al., 1992).

In ancient times, participating in a ritual was an enactment of myth that taught the participant to live spiritually (Campbell, 1988). Spirituality offered a sense of belonging and a connection to valued beliefs and traditions for many cultures. In times of difficulty, the beliefs and rituals of religion offered an avenue of comfort and meaning for the people involved. In the 1980s, religious life was often portrayed as a search and an adventure without dogmas in such spiritual practices as yoga, holistic health, meditation, martial arts, and firewalking (Allan, 1994).

Reinert and Bloomingdale (1999) found that spiritual issues were valuable components for promoting growth and development and deserve attention in counseling. It is the counselor's responsibility to access client views with respect and care because those views may give meaning, purpose, enjoyment, and hope (Miller, 2001). Counselors have identified distressful experiences concerning loss of spiritual values, questions of faith, and purpose in life, which are not necessarily attached to organized religion from a category of religious or spiritual problems presented in the *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV-TR)* (APA, 2000). In 1994, the *DSM-IV*, V62.89, described the category of Religious and Spiritual Problem and illuminated this concern as a focus for counseling (Lukoff, Lu, & Turner, 1998). Anderson and Worthen (1997) suggested that clients with an inclination towards religious and spiritual values have a moral frame of reference to work with in counseling which may be useful in the therapeutic process.

According to Jung (1933, 1958), all human problems are related to the spiritual with spiritual awakening being involved in the healing process as an instinctual movement toward integration, wholeness, and health. Neglecting the spiritual or religious values of clients could deprive them of a valuable source of strength in difficult times (Miranti & Burke, 1995). In counseling, the counselor's spirituality is of vital importance and a part of developing competence, understanding, and sensitivity to the beliefs of clients (Burke et al., 1999).

Spirituality

Kelly (1995) described spirituality as a personal declaration of a connection to the universe that transcends other aspects of connectedness. Ingersoll (1994) suggested descriptions of spirituality to avoid the illusion of being able to completely define spirituality with words that can only point to its unobservable meaning. The spiritual dimension, according to Frankl (1955), makes us human and cannot be ignored. Polanski (2002) described spirituality as more of a universal experience with fewer specific doctrines that have been associated with religion.

Myers and Williard (2003) drew on the commonalities of many definitions and suggested that spirituality be defined as "the capacity and tendency present in all human beings to find and construct meaning about life and existence and to move toward personal growth, responsibility, and relationship with others" (p. 149). Canda and Furman (1999) discussed the term spirituality as a human striving for meaning and relationships with others as well as our very being and existence in the universe. Religion was more of an institutionalized pattern of behaviors or beliefs with rules and traditions, rituals and customs. Teasdale (1999) suggested that spirituality, achieved through

spiritual practice, is an individual search and discovery of the absolute which directly relates to mysticism and causes the growth of religion as a relationship of social action.

Religion

Religion has been characterized as various systems of teachings about issues of salvation (Tenzin Gyato, 1996), the institutional expression of spirituality (Kelly, 1995), and communal forms of spirituality (Teasdale, 1999). Pargament (1997) has defined religion as human nature's tendency to actively seek significance in the sacred or that which is worthy of more than ordinary reverence. Religion can take on individual and institutional forms in search of objects of significance or the sacred (Zinnbauer, Pargament, & Scott, 1999).

The many and varied religions of the world rely on interpretations of historical events and the development of belief systems with little direct empirical evidence. The Britannica Student Encyclopedia (2003) suggested that the existence of religion is rooted in a basic human desire for understanding the origin of the world, death, and many questions about life. Spirituality has been defined as a more inclusive concept involving perspectives of one's place in the universe, while religion or religious faith, practice, or values may result from one's spirituality and refer to association with some specific religion (Pate & Bondi, 1992).

There must be a certain amount of respect for the major religions with distinct and overlapping interpretations of life and different perspectives as an opportunity for learning and teaching one another (Volf, 2003). People of differing religions faced similar problems in life and forged belief systems that helped them find understanding and meaning in their struggles (Smith, 1991). Some of the major religions include

a) Judaism, b) Christianity, c) Islam, d) Hinduism, e) Buddhism, f) Taoism, and g) New Age spiritualities (Breuilly, O'Brien, Palmer, & Marty, 1997; Smith, 1991; Teasdale, 1999).

Smith (1999) advocates an approach of humility, understanding, and respect for the world's religions. He concluded with suggestions on possible positions people might take on the relationships between religions and the people of the world. The positions were: a) One religion must be superior, b) All religions are basically alike, and c) Allowances for differences should be made without judging their relative worth. Smith concluded with wisdom from various traditions suggesting that listeners, who truly hear, work for peace that is built on understanding and mutual concern (p. 390).

Cultural Awareness

Worthington (1989) considered religious faith, for many people, to be a part of the developmental process and often used by a high percentage of the population to help them manage emotional crises. Coughlin (1992) reported increased interest in religious ties to cultural diversity and ethnicity. The African-American church's influence on development for African-American clients was addressed by Richardson (1991). He suggested the importance of multicultural awareness and respect for the influence of the church. Studies have indicated that the support of the church for African-Americans and Hispanic Americans has been influential throughout history (Johnson & Barer, 1990; Starrett, Rogers, & Decker, 1992; Williams, Griffins, Young, Collins, & Dobson, 1999).

McCullough and Worthington (1995) suggested that spiritual values influence perceptions or observations of events. Clergy have recognized the support many elderly adults have found in church congregations (Heyman & VandenBos, 1989). Koenig,

Moberg, and Kvale (1988) stated that a majority of midwestern elderly reported 80% or more of their friends were from their church.

In a study focused on the understanding of forgiveness and coping, Konstram, Holmes, and Levine (2003) found a positive relationship between expressed religiosity and forgiveness with age and gender being related variables. Mercer and Durham (1999) studied mystical experiences and found differences in gender roles and religious affiliation with higher scores for feminine and androgynous subjects, and higher scores for Catholics compared to Protestants.

Cole (2003) suggested that a client might express spiritual faith in the form of rituals that become metaphorical symbols of the client's personal power and might be seen as a mirror of the therapeutic process for inner change. Bishop (1992) examined the importance of cultural and religious values in the counseling context and emphasized the necessity of counselor knowledge in these areas that impact a client's life and process in counseling. Many cultures and religious traditions express interest in understanding various belief systems with the integration of Eastern and Western thought and the long history of Eastern influences on Western beliefs (Smith, 1991; Teasdale, 1999).

In a study of college students, Adams and Bezner (2000) connected spiritual wellness to life purpose, optimism, and a sense of coherence recognizing their importance as internal resources for overall wellness. Traditional counseling values recognize the necessity of acknowledging and respecting client beliefs and encourage counselor awareness of personal biases and assumptions (Georgia, 1994). Christians tend to value the religious/spiritual connections and may self-identify as strongly religious/spiritual and often find importance in addressing such issues in counseling (Faiver, O'Brien, &

Ingersoll, 2000; Keating & Fretz, 1990; Richards & Bergin, 1997; Zinnbauer & Pargament, 2000).

Pearson, Shavlik, and Touchton (1989) highlighted some of the cross-cultural effects on gender that are related to religion, race, and sexual orientation. They urged counselors to become more aware of these effects in order to be more effective in counseling. The differences in the way men express themselves and their beliefs were studied by Heesacker and Prichard (1992). They suggested the importance of counselors becoming more aware and accepting of gender differences with the use of more creative interventions for men that might include men's groups, awareness of myth and archetypes, storytelling, understanding without prohibiting acting out, and therapeutic silence. Evans (2001) related that women built spiritual meaning into their lives, leading the way for new and varied experiences of spirituality by tailoring their practices to suit their needs with religious ceremony, meditation, yoga, and retreats. Schroeder (1996) related that counselors have unique opportunities to address the learning and developmental goals of students by working as initiators of growth and productive activities that assist in establishing identity and purpose for their lives.

Theory

Humanistic Theory

Adler (1964) emphasized human development as evolving and as a struggle for perfection. Maslow (1968) described "self-actualizing" people as being more aware and comfortable with reality, no longer slaves to fears, and more comfortable with the unknown, thus living their lives more efficiently. Maslow (1971) revised his self-actualization theory to include a process of mystical or spiritual experiences that would

be called transcendent self-actualization. May (1968) considered the human situation as disharmony within the person and the world. The resulting possibility of an attempt to escape this disharmony in search of self-actualization pointed to a psychological or religious issue.

Rogers (1980), in his theory of person-centered therapy, described a tendency of human beings for moving toward greater order, complexity, and interrelatedness. In humanistic psychology, the psychologists included themselves in the population of humanity that emphasized validation with the client (Ansbacher, 1990). Realizing that the therapist was in relationship with the client, each perspective was taken into account along with the emotional frame of reference of the client (Obuchowski, 1988).

Ingersoll (1994) encouraged counselors to become familiar with: (a) resources that described various spiritual traditions, beliefs, and practices; (b) what made life worth living for a client that was struggling to understand and develop their spirituality; and (c) the development of spirituality as a possible construct of human development.

Transpersonal and Wellness Theories

Witmer and Sweeney (1992) related that the concept of wellness described the total person, and was a positive and progressive approach in increasing quality of life. DeHoff (1998), in her discussions on pastoral counseling, suggested that Maslow (1954) and Tillich (1963) contributed to the exploration of the psyche-spirit connection and human growth and stated, "There is a point at which psyche and spirit, psychotherapy and spiritual direction meet: the place of healing" (p. 333).

Myers (1991) proposed a wellness model for counseling "as a basic element in counseling and development" (p. 183). Others have defined wellness as "the process and

state of a quest for maximum human functioning that involves the body, mind, and spirit” (Archer, Probert, & Gage, 1987, p. 311) and “a conscious and deliberate approach to an advanced state of physical and psychological/spiritual health” (Ardell, 1988, p. 5). Myers (1991) suggested that wellness was a goal not only for the client but for the counselor as well.

Gotz (2001) suggested lives were connected spiritually with the material world and encouraged openness to the inclusion of spirit in all areas of life. Evans (2001) related that women incorporated spirituality into their lives with new and creative experiences and practices to suit their needs with religious ceremony, meditation, yoga, and retreats. Strohl (1998) examined the effects of spirituality and consciousness on personal transformation and health and found deep ramifications for optimal levels of human functioning. Adams (1999) studied the integration of being, energy, life, and meaning in the world, as part of one’s self, similar to an understanding of compassion and the generation of love as each contributed to the other.

Eastern theories have addressed spirituality in terms of enlightenment and the integration of spiritual understandings in real life (Kornfield, 2000). Epstein (2001) discussed the role of meditation in psychotherapy and how people could change. He related that people have to learn how to be honest with and about their selves for healing to begin. Strohl (1998) related that transpersonal counseling was concerned with an active process of surrendering control within the self and suggested that the counseling profession should address the influence of religious, spiritual, and ethical values on mental health and behavior.

Empirical Research

Spirituality and religion have been reported as an integral part of American lives with over 90% reporting some religious preference (Gallup, 1995; Princeton Religion Research Center, 1996). Rose, Westefeld, and Ansley (2001) reported that clients advocated the discussion of religious and spiritual concerns due to its essential role in their lives.

In a study to examine the impact of religion and spirituality on coping with stress in students enrolled in a counseling program of a southeastern university, Graham, Furr, Flowers, and Burke (2001) found that the more vital the students' spiritual health was, more coping skills were available to the students. They also found that counseling students were more uncomfortable counseling clients at extreme ends of the religious or spiritual dimensions.

A variety of coping skills drawn from a person's faith were reported by Hathaway and Pargament (1992) to be used when faced with problems. Weinstein, Parker, and Archer (2002) found that college counselors seem to be open about discussing or using spiritual and religious topics in counseling but prefer the spiritual over the religious. They suggested that counselors explore their own attitudes, beliefs, and practices in order to better understand and deal with these issues in practice.

The implications of the importance of spirituality in mental health have been documented in studies related to self-esteem (Ellison, 1993), recovery from divorce (Nathanson, 1995), substance abuse (Brooks & Matthews, 2000; Muffler, Langrod, & Larson, 1992), moral development and purpose in life (Young, Cashwell, & Woolington, 1998), and personal well-being (Ellison & Levin, 1998).

Sheridan and Wilmer (1994) suggested, from the results of their study of social work faculty in the Southeast, that although the topic of religious and spiritual content in curriculum was controversial, more discussion was necessary given the disparity in the results of their study. The study showed the importance of religion and spirituality in the participants and the lack of training within the schools of social work. In 1999, Sheridan and Hemert investigated the religious and spiritual experiences and views of social work students and found students were positive about the role of religion and spirituality in practice and interventions with clients, but had limited training in these areas.

Self-efficacy

Russo (1984) related that counselors have been reluctant to approach spiritual matters with clients due to lack of training. An individual's expectations that the knowledge and skills are present to complete a task form the foundation for self-efficacy and are the end result of a cognitive appraisal process combined with personal and situational factors (Bandura, Adams, Hardy, & Howells, 1980). Self-efficacy in counseling has been linked to competency in various aspects of counseling (Leach & Stoltenberg, 1997). Bandura (1986) defined self-efficacy as a self-assessment of confidence in abilities to execute specific skills, in specific circumstances, with a successful outcome.

Self-efficacy in counseling has been linked to competency in various aspects of counseling including supervision of counselors and trainee development (Leach & Stoltenberg, 1997). Social work self-efficacy measures for practice skills have been minimal until Holden, Meenaghan, Anastas, and Metrey (2002) developed a scale and continue to study its efficiency. In a class designed as a pilot study for teaching

spirituality in counseling, Curtis and Glass (2002) found that students increased in their understanding and self-awareness of religious and spiritual issues through role-play, presentations, and research. Given the evidence, religious and spiritual values in counselors and clients deserve attention within the counseling context (Burke et al., 1999).

Theory

Bandura's (1977) Social Learning Theory suggested that learning occurred through the observation of others resulting in shortened learning periods and reflected complex integration of vicarious experiences. Bandura (1982) suggested that self-efficacy was gained through decreased emotional response, verbal encouragement, vicarious experiences, and mastery with positive accomplishments. Bandura (1986) related that efficacy expectation and outcome expectation serve important mediating roles between an individual and an individual's behavior, and the behavior and the outcome of that behavior.

Empirical Studies

Research has supported this theory of self-efficacy in counselor trainee professional development with studies in levels of experience (Sipps, Sugden, & Favier, 1988), expectations for supervision (Friedlander & Snyder, 1983), anxiety level and performance (Friedlander, Keller, Peca-Baker, & Olk, 1986). Studies in self-efficacy have addressed specific skill development with rehabilitation (Bieschke, Bishop, & Herbert, 1995), family medicine (Laschinger, McWilliam, & Weston, 1999), psychology (Bishop & Bieschke, 1998), school counselors (Sutton & Fall, 1995), and research methods (Holden, Barker, Meenaghan, & Rosenberg, 1999).

Bandura (1997) related that peoples' lives are guided by their beliefs of their own efficacy both in action and effort. Pate and Bondi (1992) suggested that counselors and counselor educators must recognize the importance of, and gain the skills to deal with, religious and spiritual beliefs and values, as a component of client culture. Lack of acknowledgment and preparation for dealing with religious and spiritual issues in counselor training may, in some way, encourage counselor insensitivity to clients' religious and spiritual issues (Hinterkopf, 1994).

Burke and Hackney (1999) emphasized the importance of recognizing religious and spiritual aspects of counselor personality, in order to lessen the chances of unconscious imposition of counselor values and beliefs onto clients. In developing a measure for counseling self-efficacy, Johnson et al. (1989) found that efficacy increased over a period of time for master's level participants. Sipps, Sugden, and Favier (1988) reported higher counselor self-efficacy to be related to greater clinical experience. Other studies have also found progression of self-efficacy as participant levels of training and experience increased (Friedlander & Snyder, 1983; Larson et al., 1992; Melchert, Hays, Wiljanen, & Kolocek, 1996).

Spirituality and religion are meaningful aspects of development in many people's lives (Ellison, 1991; Worthington, 1989). "The competent counselor is self-aware of his or her own spiritual/religious values, and sensitive to their operation in the counseling session" (Burke & Hackney, 1999, p. 254).

College Student Development

Choices of major importance are often made in the period of young adulthood that can alter previous coping skills and pathways for success (Pickles & Rutter, 1991).

Spirituality and religion have played a developmental role as individuals formed values, beliefs, and meaning (Erikson, 1968). An individual's spiritual values influence perceptions and observations of events (McCullough & Worthington, 1995).

Chickering and Reisser (1993) explained developmental change in the transition from late adolescence to young adulthood by incorporating many cognitive and psychosocial views into a comprehensive approach. They identified seven developmental tasks or vectors to assist in determining direction and strength in an individual moving towards individuation. These vectors involved the development of: (a) a sense of intellectual, physical, and interpersonal competence; (b) the ability to know and own one's emotions; (c) interdependence; (d) mature interpersonal relationships; (e) one's own identity; (f) a sense of purpose; and (g) integrity inclusive of humanizing values, personalizing values, and congruence between personal and social values and behavior. As trainees transition through the developmental tasks, opportunities for learning and self-reflection may enhance progress and responsiveness to the needs of others (Glover, 2000).

Counselor and Social Work Trainee Development

One avenue for evaluating counselor development has been to measure self-efficacy related to the various competencies within the profession (Bandura, 1986; Ewart, 1995; Holden, 1991). The focus of spirituality in counseling and counselor education was discussed at the Summit on Spirituality in 1995 (Miller, G., 1999). Nine competencies were suggested for inclusion in the CACREP standards for core curriculum. The competencies suggest that, where spirituality is integrated into counseling, a competent counselor can:

1. Explain the relationship between religion and spirituality, including similarities and differences.
2. Describe religious and spiritual beliefs and practices in a cultural context.
3. Engage in self-exploration of his/her religious and spiritual beliefs in order to increase sensitivity, understanding and acceptance of his/her belief system.
4. Describe one's religious and/or spiritual belief system and explain various models of religious/spiritual development across the lifespan.
5. Demonstrate sensitivity to and acceptance of a variety of religious and/or spiritual expressions in the client's communication.
6. Identify the limits of one's understanding of a client's spiritual expression, and demonstrate appropriate referral skills and general possible referral sources.
7. Assess the relevance of the spiritual domains in the client's therapeutic issues.
8. Be sensitive to and respectful of the spiritual themes in the counseling process as befits each client's expressed preference.
9. Use a client's spiritual beliefs in the pursuit of the client's therapeutic goals as befits the client's expressed preference. (Burke, 1998, p. 2)

Reinert and Bloomingdale (1999) reported that spiritual development and mental health were related, and deserved attention in counseling. Genia (1997) suggested that spiritual maturity indicated a person's ability to tolerate uncertainty and establish a greater sense of well-being.

CACREP (2001) standards encourage counseling students and counselors to enhance their knowledge in interpersonal and group skills through workshops and small group experiences. The standards stipulate curricular experiences for students in

foundations for each counseling emphasis that include the role of religion and spiritual values and beliefs in counseling. Spirituality is defined in the glossary of CACREP standards as an inner life which is part of the wholeness of an individual and a motivating force for actions and thought processes which may be appropriate considerations in counseling. Although there have been many obstacles to consistently providing courses that integrate spirituality and religion into the counseling curriculum (Cashwell & Young, 2004), some textbooks have been written in recent years (Frame, 2002; Fukuyama & Sevig, 1999; Miller, 2002).

The American Counseling Association (ACA) was developed as a professional, educational, and scientific organization dedicated to enhancing human development across the life-span (Herlihy & Corey, 1996). Counselors have been trained to work with diverse populations and understand many theoretical approaches to counseling (Corey, 1996). Counselor education programs have recognized the importance of the whole person throughout the developmental process (ACA, 1995). Historically, some counselors have resisted the inclusion of religious or spiritual issues due to personal bias or lack of knowledge about various religious and spiritual thought (Burke & Hackney, 1999; Lovinger, 1979).

Social Work was established in 1890 with the intention of promoting the welfare of society and individuals through counseling, aid to the needy, ill, aged, and others seeking help and mental health services (Gibelman, 1999). The Council on Social Work Education (CSWE, 2003) was developed to promote academic excellence in social work education with specified curricular content and educational context that prepare students for professional social work practice. The CSWE includes policies for education in

accredited institutions that require objectives for content including theories and knowledge that focus on spiritual development across the life span. Articles advocating religion and spirituality as legitimate aspects of social work practice appeared in literature in the late 1980s (Canda, 1988; Holland, 1989; Sanzenbach, 1989; Sheridan et al., 1992).

Sermabeikian (1994) related that spirituality was virtually unexplored in social work. In 2001, Hodge, Cardenas, and Montoya related implications for social work practice in an article discussing the relationship of substance use and religious and spiritual practices of rural youth in the Southwest. They found a relationship in the participation of religious and spiritual activities and decreased drug and alcohol use.

Recognition of the Issue

The American Counseling Association (ACA) (1995) ethical guidelines urge members to respect value differences and to avoid value impositions or discrimination. The National Association of Social Workers (NASW) Code of Ethics for Social Work encourages the enhancement of human well-being, and meeting peoples' basic human needs, with particular attention given to needs and empowerment of those vulnerable, oppressed, and poverty stricken (NASW, 2000). Counselors and trainees are encouraged not to enter into issues outside their expertise and are bound by ethical standards to know their limits and to do no harm (ACA, 1995; NASW, 2000).

Kamya (2000) published an article challenging social work educators and clinicians to take a closer look at the inclusion of spirituality in training and the need for further research. Counselors have also been encouraged to become self-aware of spiritual/religious values (Burke & Hackney, 1999) and increase in their knowledge base

of religion and spirituality or refer clients to another professional (Miranti & Burke, 1995).

Christina Grof, founder of Spiritual Emergence Network (SEN) at Esalen Institute (Prevatt & Park, 1989), formulated the concept of spiritual emergence in 1980. Her work contributed to the evolving understanding and awareness of spiritual and religious issues in clients. In 1996, Judy found that more counselors were dealing with spiritual or transpersonal issues but had difficulty with the extremely religious clients.

Diagnostic Tools

In 1994, the DSM-IV (American Psychiatric Association, 1994) included a diagnostic category (V62.89) of Religious or Spiritual Problem. Lukoff and Turner (1998) discussed the proposal for the new category, with its roots in the transpersonal movement, and gave the definitions of religious and spiritual problems in order to increase cultural sensitivity. In their book about spiritual emergence, Grof and Grof (1990) described the development of spiritual awareness and the many complications that might arise. They stated that spiritual emergencies involve difficult stages of psychological transformation in the form of intense emotions, visions, unusual thoughts, and some physical manifestations.

Counselor Perceptions

Hickson, Housley, and Wages (2000) investigated the perceptions of Licensed Professional Counselors (LPC) in the Southeastern United States regarding the importance of self-awareness of spiritual beliefs. They found support for this issue and suggested its relevance in counselor education training.

In 1933, Jung related that the process of change necessitates acceptance without condemnation that only oppresses. Empathy and competence within the realm of religion and spirituality are essential for counselors as they assess a client's belief system related to behavior, affect, and cognition (Faiver, O'Brien, & Ingersoll, 2000). Genia (2000) suggested that counselors carefully consider theoretical and ethical issues in the treatment of religious clients with self-evaluation and attention to possible countertransference reactions.

Issues related to counseling student perceptions of spirituality in counseling were addressed by Souza (2002) resulting in suggestions for more education to enhance student comfort, knowledge, and competence in the area of spirituality. Larson and Larson (2003) found potential relevance in research for the importance of spirituality and religion in physical and mental health. They suggested collaboration with trained professionals in meeting the needs of spiritual/religious clients as a team approach. The assessment of spirituality in the counseling setting has been suggested as a tool for counselors in treatment and diagnosis (Kelly, 1995; Richards & Bergin, 1997).

Stanard, Sandhu, and Painter (2000) stated that spirituality was critical for mental health and encouraged counselors to develop an understanding of the spiritual condition of clients and consider assessment with instruments that measure spirituality. Many articles have advocated the inclusion of spirituality in training and counseling with emphasis in areas of supervision (Polanski, 2003), education (Matthews, 1998), multimodal therapy (Curtis & Davis, 1999), terminal illness and transpersonal approaches (Smith, 1995), constructivist and pluralist approaches (Zinnbauer & Pargament, 2000), and change within the profession (Jankowski, 2002).

Precautions and Dangers

Therapeutic relationships with clients may be jeopardized when counselors ignore the fact that a client is Muslim, Jewish, Buddhist, Hindu, or Christian with possible assumptions that religion is irrelevant to the issues (Burke & Hackney, 1999). Eriksen, Marston, and Korte (2002) suggested that conservative Christian beliefs may challenge the counseling process and offered options that may be useful for counselors.

In dealing with the spiritual, Sermabeikian (1994) suggested that social work practitioners look beyond the obvious and what may not fit into their own perspectives of the world, to consider the meaning of life and find the inspirational and meaningful that inspires without focusing on pathologies. When clinicians and trainees have not developed competence in the area of spiritual or religious issues, there is a danger of causing harm or not respecting individual dignity, diversity, and values (ACA, 1995; NASW, 2000).

Summary

Spirituality and self-efficacy in counseling and social work education and training has been revealed in this review of literature, as a source of discussion, debate and theoretical alchemy. Research has shown the reluctance in educating trainees in the areas of spirituality and religion and at times denied the value for such training. Concerns of ethics, values and standards of counseling and interventions with clients have raised awareness for further training regarding religions of the world and spiritual practices that may enhance client and counselor effectiveness in life and efficacy in practice. Many of the theories reviewed noted foundations and approaches based in the recognition of areas of an individual's life that often reveal spirituality. It is the counselor's responsibility to

access client views with respect and care because those views may give meaning, purpose, enjoyment, and hope (Miller, 2001). In a study related to spiritual maturity and mental health, Reinert and Bloomingdale (1999) found that spiritual issues were valuable components for promoting growth and development and deserve attention in counseling.

Kelly (1995) defines religion as the “creedal, institutional, and ritual expression of spirituality that is associated with world religions and denominations” and spirituality as a “personal affirmation of a transcendent connectedness to the universe” (p. 4). Although many counselors and students have expressed interest in religion and spirituality as relevant in counseling and training (Faiver, Ingersoll, O’Brien, & McNally, 2001; Kelly, 1995; Sheridan & Hemert, 1999; Hodge, 2001), few programs have consistently developed training and supervision that include religion and spirituality (Kelly, 1994; Sheridan & Wilmer, 1994; Young et al., 2002).

Anderson and Worthen (1997) suggested that clients with an inclination towards religious and spiritual values have a moral frame of reference to work with in counseling which may be useful in the therapeutic process. Competency in the areas of religion and spirituality are encouraged, through the educational and training processes, as a part of cultural diversity (CACREP, 2001; CSWE, 2003). The diversity of perspectives and beliefs in areas of spirituality and religion would make it very difficult for a counselor or student to become knowledgeable in every belief or practice. However, it is incumbent on the educators to provide foundational tools to students/trainees to approach competence in areas of counseling that require diversity and basic knowledge of various cultures, religions and spiritualities evident in potential clients.

Self-efficacy in counseling has been linked to competency in various aspects of counseling (Leach & Stoltenberg, 1997). Social work self-efficacy measures for practice skills have been minimal until Holden, Meenaghan, Anastas, and Metrey (2002) developed a scale and continue to study its efficiency. Awareness of the whole person and the goals and strengths that person brings to counseling serve to enhance the therapeutic process and the client counselor relationship for change.

In a class designed as a pilot study for teaching spirituality in counseling, Curtis and Glass (2002) found that students increased in their understanding and self-awareness of religious and spiritual issues through role-play, presentations, and research. Recognition of the need for training and the desire for foundational knowledge of popular and cultural belief systems have driven the educational process thus far. The world events and experiences of trauma in a person's life may cause ultimate questioning of meaning and purpose in the world and their personal beliefs. Counseling and Social Work trainees have expressed interest in religion and spirituality as relevant in counseling and training (Faiver, Ingersoll, O'Brien, & McNally, 2001; Hodge, 2001; Kelly, 1995; Sheridan & Hemert, 1999). Given the evidence, religious and spiritual values in counselors and clients deserve attention within the counseling context (Burke et al., 1999).

CHAPTER 3: METHODOLOGY

Religion and spirituality in counseling settings have gained more attention in recent years. Research has not addressed the trainees' level of spirituality or religious/spiritual awareness and its relationship to counselor self-efficacy in dealing with these issues in counseling. Counseling and social work education programs have shown favorable support for the inclusion of training in religious and spiritual issues as evidenced by several articles and studies (Miller, 1999; Sheridan & Wilmer, 1994). Counseling and social work programs have not consistently implemented training in religion/spirituality due to low faculty self-efficacy in the areas of religion and spirituality (Sheridan & Wilmer, 1994; Young, Cashwell, Wiggins-Frame, & Belaire, 2002).

The research design was a correlational design utilizing web-based survey methodology on a secure server at a Midwestern university. The purpose of the design was to correlate the scores of the spirituality and religion/spirituality awareness surveys with the self-efficacy survey scores, as well as measure the influence of specified demographics to the scores. Because a sample of convenience was used, any generalizations to populations would be restricted or made with extreme caution.

This chapter discusses the participants, instruments, procedures followed, and data analyses. Research questions were restated to clarify the study and the necessary statistical tests.

Purpose of the Study

The purpose of this study was to explore the relationships of the counseling/social work trainee spirituality and religion/spirituality awareness to trainee self-efficacy in counseling clients with religious/spiritual issues and/or backgrounds. In addition, the

study assessed the influence of demographic variables on spirituality, religion/spirituality awareness, and self-efficacy including: (a) religious/spiritual affiliation, (b) ethnicity, (c) training/accreditation program affiliation, (d) gender, and (e) age.

Religious/spiritual affiliation was identified as a dichotomous variable reflecting a participant self-identification of Christian or non-Christian due to the complexity of the many affiliations specified by participants. Similarly, ethnicity reflected the dichotomous variable of Caucasian and non-Caucasian and training/accreditation program affiliation denoted CACREP and CSWE. Age was divided into 6 groups for participants' selection of (a) less than 25, (b) 25-30, (c) 31-36, (d) 37-40, (e) 41-49, and (f) 50 plus.

Participants

Social work students from programs accredited by the Council on Social Work Education (CSWE) and counseling students from programs accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) that met the criterion of being a master's student anticipating graduation in three semesters or less were targeted for the study.

The study focused on master's students planning to graduate in three semesters or less in order to increase the likelihood that students had completed most of the coursework and an introductory practicum/internship course in counseling. Student self-efficacy related to religious/spiritual issues may be limited more when a student is just beginning coursework and training in counseling (Johnson et al., 1989). Surveying students in their last two to three semesters offered the possibility that they had received the coursework and training necessary to build some self-efficacy for counseling a diverse population of clients.

The population of counseling and social work students was chosen due to this researcher's affiliation and education from both programs. Each discipline has produced articles and research related to spirituality and the need for further study in order to prepare students to work with clients having religious/spiritual affiliations, support, problems, and experiences. Universities with master's level programs in counseling, accredited by CACREP, and social work, accredited by CSWE that were identified on a list of accredited universities (CACREP, 2001; CSWE, 2003), offered a broad perspective of training, spiritual/religious affiliations, and their respective impacts on self-efficacy and spirituality levels within each discipline.

Research has suggested that many people residing in areas of the South and Southeast may tend toward strong Christian/religious affiliations and rate themselves high on spirituality (Graham, Furr, Flowers, & Burke, 2001; Hickson, Housley, & Wages (2000). Therefore, it was determined by this researcher that in order to have the greatest possibility of a strong effect and variety of participants, every CACREP accredited and CSWE accredited university program with available electronic/e-mail technology was invited to participate in the study.

The self-selected convenience sample for this study came from master's level counseling and social work programs listed with CACREP and CSWE. Accredited by CSWE, the 146 Social Work programs listed and invited to participate encompassed many areas of human well-being including: (a) medical social work, (b) mental health counseling, (c) school and community social work, and (d) clinical private practice preparation (NASW, 1996). Counselor Education, Rehabilitation Counseling and Counseling Psychology programs accredited by CACREP, totaled 179 invitations.

CACREP programs have offered training in counseling with emphases in areas such as: (a) school counseling, (b) community agency or mental health counseling, (c) college counseling, and (d) career counseling. CACREP and CSWE programs have recognized the importance of the whole person throughout the developmental process (ACA, 1995; CACREP, 2001; CSWE, 2003; NASW, 1996). A list of e-mail addresses for program chairs and/or one to four faculty members were obtained through intensive searches from the lists and available websites.

Of the 325 CACREP and CSWE universities invited to participate through an e-mailed invitation to professors, some responded back to this researcher at various times in the study. This researcher responded to inquiries about the study and cordially answered questions and requests for more information either about this researcher or whether IRB approval had been granted for the study. Further information regarding e-mail contacts by this researcher and the invited universities were as follows: (a) 2% ($n = 5$) of universities on the CACREP and CSWE lists ($n = 330$) had no e-mail contacts listed, no website available for obtaining the program listings of faculty, and were not invited; (b) 3% ($n = 9$) of universities invited to participate refused; (c) 14% ($n = 59$) of student participants responded to this researcher through e-mail requesting overall survey results or made comments about the survey; (d) 1% ($n = 4$) of the student participants responded through e-mail to this researcher with negative comments regarding the apparent Christian biases in the language of the spirituality survey; (e) 5% ($n = 20$) of the student participants responded through e-mail with positive comments regarding the survey as a whole.

Some of the accredited CACREP and CSWE universities invited to participate in the study were either self-identified as a Seminary ($n = 1$) or various affiliations of

religious institutions ($n = 3$). Given the variety and number of universities and their locations across the United States, there was no reason to suspect that problems with the sample would arise due to training or education in such institutions. The participants were self-selected through volunteer completion of the web-based survey.

Instruments

Three survey instruments were used in this study. In addition, there was a demographic survey that solicited anonymous information regarding ethnicity, gender, age, religious/spiritual affiliation, and whether the student was in a counseling or social work program.

Religion/Spirituality Awareness Survey

There were ten self-report questions and one open-ended question in the Religion/Spirituality Awareness Survey (RSAS) (Appendix A), developed by this researcher to measure religion/spirituality awareness, which asked the student to: (a) rate their knowledge level (None, Low, Moderate, or High) regarding specific affiliations of religion/spirituality that would include terms, beliefs, rituals, and customs; (b) rate the level of training received in their program regarding religion/spirituality, for self and clients, and (c) list any courses in their program believed to offer training in dealing with religious/spiritual issues in counseling.

This instrument used a summated rating scale or Likert scale of: 0 = None, 1 = Low, 2 = Moderate, and 3 = High. In the first set of eight questions, the observed value of None indicated that the participant had no knowledge of the religion/spirituality; Low indicated a little knowledge that the religion/spirituality exists; Moderate indicated that the participant could discuss some aspects of the religion/spirituality but did not know or

understand all beliefs, rituals, or customs associated with the religion/spirituality; High indicated a strong conversational knowledge of terms, beliefs, rituals, and customs of the religion/spirituality.

Seven religions/spiritualities were identified in the survey after reviewing literature and educational resources that agreed on the large number of followers and popularity (Canda & Furman, 1999; Smith, 1999; Teasdale, 1999). Question number eight asked participants to list any other religions/spiritualities and rate their awareness for those religions/spiritualities.

In the second set of two questions, the Likert scale was the same as the first. However, in these questions, the observed value of None indicated no training in religious/spiritual issues received in the program; Low indicated incidental reference in one class; Moderate indicated more than one instance of class time dedicated to the topic that stimulated further study; High indicated at least one course was dedicated to training in religious/spiritual issues for counseling.

The final question was an informational open-ended question intended to assist in recognizing training in programs that address religious and/or spiritual issues in counseling. Calculating the mean for questions 1-7, 9, 10, provided an awareness score for each participant on the RSAS.

Tests for internal consistency were performed in the study to determine the extent to which the individual items correlate with one another using Cronbach's coefficient alpha (Hatcher & Stepanski, 1994). No other instrument was found by this researcher to address these specific questions of awareness.

Counselor Self-efficacy Scale

Self-reported levels of efficacy were assessed with the Counselor Self-efficacy Scale (CSES) (Baker, 1989; Johnson et al., 1989). It was designed to measure the level and strength of counseling efficacy. The CSES consists of 33 items and was originally designed to have the participant check whether he/she could perform the behavior and then rating his/her confidence in performing the counseling behavior. With the author's permission (Appendix B), this researcher added to the instructions (Appendix C) to direct participants to: (a) recognize the inclusion of religious/spiritual issues and/or backgrounds in discussions with a client, (b) be reminded of the counselors' ethical obligations not to try to change or influence client beliefs or orientation with regard to religion/spirituality, and to (c) specifically rate self-efficacy with regards to dealing with or addressing the religious/spiritual as indicated in the counseling behaviors.

The number of behaviors checked ranging from 0 to 33 originally measured levels of counseling self-efficacy. Strength of counseling self-efficacy was originally measured by the rating participants assigned each of the items checked from 0 to 100. Total self-efficacy scores were determined by dividing the total strength by the number of behaviors checked and range from 0 to 100. Higher scores indicate higher levels of self-efficacy related to the listed counseling behaviors.

With the author's permission (Appendix B), the scale was modified for a web-based format by instructing participants to simply rate each of the 33 counseling behaviors on a scale of 0 (no confidence) to 10 (complete confidence) using numbers on the scale (0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10) as they go through the list thinking about their level of confidence in performing each counseling behavior (Appendix C). Adding the

ratings and dividing by 33 determined total CSES scores. Consistency for the modified scale was measured using Cronbach's coefficient alpha (Hatcher & Stepanski, 1994).

The initial pilot study for the original CSES consisted of 44 students in an undergraduate introductory counseling course. Test-retest correlations were .78 for Level and .88 for Strength. Alpha coefficients on Strength scores were .95 for the first test and two weeks later .97 for the second indicating a high internal consistency.

The original CSES was used in a study to examine the relationship between counseling efficacy and performance in a graduate counseling skills class over the first eight weeks of the course (Johnson et al., 1989). The sample used was 50 master's students in counseling with a pretest/posttest design which divided the students into four groups based on pretest scores on the CSES of high and low, and then adding the variable of with and without counseling to give equal groups of each combination. The analyses of efficacy measures showed parallel results for Level and Strength.

The range of Strength scores at pre-training was large (21.15 to 94.62) with a coefficient alpha of .93. Correlations among the repeated measurements of efficacy Strength revealed that efficacy was quite stable with pre-training and post-training 1, correlation = .80; between post-training 1 and post-training 2, correlation = .80; between pre-training and post-training 2, the correlation was .75. As the study predicted, the post-training efficacy highly correlated with generalized efficacy, $r = .91$ at post-training 1, and $r = .94$ at post-training 2, with $n = 48$ and $p < .001$ (Johnson et al., 1989). The study also included other measures for skills, not reported by this researcher.

Psychomatrix Spirituality Inventory

Self-reported levels of spirituality were assessed with the Psychomatrix Spirituality Inventory (PSI) (Wolman, 2001), which was developed with the intent of studying the spiritual practice and experience of men and women. This instrument was used in its original version without modification and by permission of the author (Appendix D).

The PSI consists of 80 items that assessed the focus and pattern of an individual's spirituality. Individuals were directed to score each item on a scale of 1 (Never), 2 (Seldom), 3 (Often, more than 50%), or 4 (Almost Always). Seven factors were developed that describe the spiritual experience and behavior of those completing the inventory. The factors are: (a) Divinity: the sense of connection to a God figure or divine energy source; (b) Mindfulness: awareness of the interconnection of the mind and body, with an emphasis on practices that enhance that relationship; (c) Intellectuality: a cognitive, inquiring approach to spirituality, with a focus on reading and discussing sacred texts; (d) Community: the quality of spirituality enacting connection to the community at large, whether in charity or politics; (e) Extrasensory perception: spiritual feelings and perceptions associated with non-rational ways of knowing, including prophetic dreams and near-death experiences; (f) Childhood spirituality: a personal historical association to spirituality through family tradition and activity; (g) Trauma: a stimulus to spiritual awareness through experiencing physical or emotional illness or trauma to the self or loved ones (Wolman, 2001, pp. 2-3).

Scores for each item in a factor of the PSI are added together and divided by 7 to give a factor score. A grid was used to determine whether a person scored high,

moderate, or low according to gender (Appendix E). The total mean score for the seven factors, a score added by this researcher, was calculated to give females Total Factor Scores of: (a) high ranging 2.6 or higher, (b) moderate score ranging 2.0 to 2.5, or (c) low score ranging from less than 1.9 and for males (d) high score of 2.4 or higher, (e) moderate score ranging 1.8 to 2.3, or (f) low score ranging less than 1.7. The Total Factor Score was used to indicate a total spirituality score used for correlations with the other variables.

In the original analysis of the PSI, interpretations of the scores for each factor involved discussing their interactions with other factors using general terms of high, moderate, or low. Wolman (2001) stressed the importance of seeing a bigger picture of how spirituality relates to every part of an individual's life rather than seeing high scores as intrinsically good and low scores as necessarily bad. The score was meant to show the emphasis the individual placed on that particular dimension of spirituality. For example, a high score on Divinity indicated that a high amount of spiritual energy was placed on Divinity and the individual shares that approach with others that are similar. The indication is simply of different ways of being in the world and not a judgment or evaluation (Appendix F). Wolman described each level of each factor by relating the factor to life experiences, relationships, and perspectives and outlining possible indications and risks much like a personality inventory.

Wolman (2001) suggested that the PSI assists individuals in identifying personal patterns of spirituality represented in the seven factors. He also indicated that an understanding of one's spirituality, behavior and internal experience, could assist in spiritual development and self-awareness. Several studies were conducted with those that

identified themselves as spiritual and others with little to no interest in spirituality. The initial pilot study was conducted with 714 predominantly well-educated adults. Factor analysis was used to analyze the data with seven factors emerging (Wolman, 1997). He stated that women produced higher scores and that age was found to have a high association with Experience with spiritual activities or practices, Experience of physical or emotional trauma, and Body awareness.

Wolman (2001) continued to circulate the PSI and broadened the population to college students, psychologists, medical patients, physicians, nurses and prisoners. He reported that the items loaded on the assigned factors with continued support throughout thousands of respondents ($N = 4737$). Reliability levels for factors were estimated in Wolman's study as: Divinity $\alpha = .87$; Mindfulness $\alpha = .80$; Extrasensory Perception $\alpha = .79$; Community $\alpha = .70$; Intellectuality $\alpha = .68$; Trauma $\alpha = .77$; and Childhood Spirituality $\alpha = .80$.

Tests for internal consistency for this researcher's study were performed to determine the extent to which the individual items correlate with one another, and the factors with the total factor score, using Cronbach's coefficient alpha (Hatcher & Stepanski, 1994).

Demographics

A demographic form (Appendix G) was included in the survey and placed at the end of the last questionnaire. Participants were asked to provide information such as university name and location, program affiliation, age, gender, ethnicity, religious/spiritual affiliation and prior education or training received in religion/spirituality. Instructions directed the participant to identify the completion time

frame of the Master's in order to clearly separate the appropriate participants in the survey, completing the master's degree in one year or less, from those that participated but did not meet the study criterion. This criterion was changed to three semesters or less due to the responses of participants and the difficulty in clarifying one year of school. In addition, data were collected on participants' level of experience, which showed 82% ($n = 346$) having 5 years or less but was not used in the analyses since the information followed the trends of most research for this population which revealed that efficacy increased with added years of experience (Friedlander & Snyder, 1983; Johnson et al., 1989; Larson et al., 1992; Melchert, Hays, Wiljanen, & Kolocek, 1996).

Procedures

Web-based surveys offer an advantage of looking similar to paper-based surveys and being simple to manage when participants are most likely familiar with computer type surveys, and the researcher has a limited budget (Anderson & Kanuka, 2003). This researcher contacted experts in the field of computing services and web-based surveys for assistance in coding the survey and insuring a quality survey that offered anonymity, confidentiality from a secure server, and proper coding for process validation. This process was approved by this researcher's committee and advisor along with research and literature on web-based survey acknowledging the importance of security, accuracy, and confidentiality (Anderson & Kanuka, 2003).

The surveys were formatted and compiled by this researcher to insure proper acknowledgement and citations of resources and authors for the instruments used. Acknowledgement for participation and implied consent was at the top of the initial page and in bold type (Appendix H). The order of the surveys was as follows: CSES, PSI,

RSAS, and Demographics. Technologists coded the survey into Hypertext Mark-up Language (HTML) and worked with this researcher through numerous edits and trial uses of the survey. The survey was constructed in a vertical fixed format with auto-stretch tables designed to flex with the computer screen size and resolution (Dillman, 2000).

Participants were able to tab or scroll from question to question and flow vertically down the survey with relative ease. Data collected were downloaded on the secure server into spreadsheets designed to collect the appropriate values for each item and variable as assigned. When the survey was ready for testing, a web address on the secure server was assigned.

Each participant in the survey was identified as anonymous and assigned an identification number unrelated to their identity. No identifying information that would allow follow-up or later identification of the participant was obtained during the survey. Participants were informed of the implied consent as they entered the website (Appendix H). The instructions also notified the participant that they would be required to complete the survey in its entirety and check the submit box and click the submit button before their answers would register. Instructions in the invitation for participation and at the beginning of the survey were clear that the participant would not be allowed to return to the survey once they exited the site.

Pilot Study

The study was piloted for clarity and appropriateness, during the first week of January 2004, with 16 students from social work, counseling, and various professional backgrounds to provide feedback about the structure and content of the survey. The

participants were asked to measure the length of time required to complete the survey and offer insight or suggestions regarding the clarity and ease of operation.

Issues were addressed in the structure and coding of the survey to improve auto-stretch capabilities after several participants had difficulty with the flexibility of the text to screen variations. Suggestions of vertical flow for tabs and scrolling were included in the final version of the survey. The average time to take the survey was 20 minutes, with positive feedback about clarity and flow throughout the final version of the survey.

Web-based Survey

A web-based survey offered the advantages of lower costs, less time, immediate error checks and results, data directly entered by participant, and flexibility in design with higher rates of return (Anderson & Kanuka, 2003). The disadvantages associated with e-surveys included limited incentives, limited access to those with internet capability, difficulty authenticating the survey participant, and professor and/or participant procrastination or disregarding attempts at notification.

These issues were dealt with by making the process easily accessible through hyperlinks and a web address in the invitation, presenting the survey in a timely manner that did not interrupt the beginning or end of a semester, and using follow-up e-mails to encourage professors initially contacted to post the second invitation/reminder information on the listserv. Participants were acknowledged as contributing to the overall learning and development of students and educators within their profession.

Counseling and Social Work professors from each university were contacted through e-mail beginning January 28, 2004 (Appendix I), as unrevealed recipients, to inform them of the study and a student opportunity for involvement in the study. Each

received the same invitation (Appendix I) which included a hyperlink and/or the survey web address displayed within the invitation and information about the research topic, implied consent, confidentiality, this researcher, and Institutional Review Board approval, and a request for alternate contacts within the program that may be responsible for listserv or program involvement decisions.

An e-mail address for this researcher was included in the invitation and survey website as a convenient avenue for questions, comments, and requests for overall statistical non-identifying survey results. Professors were asked to post a copy of the invitation on their program's listserv and/or information board if electronic/listserv communications were not available, in order to give students an opportunity to participate in the study. Two weeks later a reminder e-mail was sent to the same professors, or ones identified from the first mailing as appropriate contacts, restating the request for posting and a second reminder invitation (Appendix J).

In keeping with the social exchange theory (Dillman, 2000), the rewards for the students responding included a confidential offering of information for further study, other websites on the topic, and the positive regard of potential contributions to the increased understanding and learning for future counseling students. Respondents were given an opportunity to contribute suggestions for training in religious and/or spiritual issues or comments about the survey through e-mail at the end of the survey. There was no expectation of harm or complications for students that took the survey. They were made aware of services at their university or directed to their advisor to assist them in exploring any issues that might arise as a result of the survey.

The participant indicated a desire for overall non-identifying results of the entire survey by sending an e-mail to this researcher at the end of the survey. To encourage professor cooperation in posting the invitation on the listserv or information board, the researcher offered the results of analyses on total scores for the entire sample of Counseling and Social Work trainees on spirituality and self-efficacy. Due to the importance of confidentiality, and the non-identifying nature of most e-mail addresses, it was not possible to determine how many universities requested results.

The university's Institutional Review Board (IRB) and the researcher's dissertation committee approved the study and implied consent before implementation. In addition, the methodology of web-based data collection and population of college students was approved and included a description of the survey by indicating that the study was concerned with the relationship between participant's spirituality and self-efficacy as a counseling or social work trainee that may counsel clients with religious and/or spiritual issues.

Data Analysis

In determining sample size, a power analysis was considered to determine the approximate number of participants for the study (Rudestam & Newton, 2001). To reduce the possibility of a Type II error and increase the power of the study, a power level of .80 and an alpha level of .05 were used with no less than 64 participants in each group, counseling and social work trainees, for a total of 128 to detect medium effects as statistically significant. Alternately, Hatcher and Stepanski (1994) suggested a sample size determined by what most experts recommend as at least 15 participants per predictor variable for a total in this study of no less than 135 participants. This study had a total of

423 participants ($n = 252$, CSWE; $n = 171$, CACREP) and addressed the following research questions:

1. Does spirituality, as PSI Total Factor Score, relate to the level of trainee self-efficacy in counseling clients with spiritual/religious issues and/or backgrounds?
2. Do each of the seven factors of trainee spirituality relate to trainee self-efficacy in counseling clients with spiritual/religious issues and/or backgrounds?
3. Does trainee religious/spiritual awareness relate to trainee self-efficacy in counseling clients with spiritual/religious issues and/or backgrounds?
4. Does trainee spirituality differ in relation to:
 - a) Religious/spiritual affiliation
 - b) Ethnicity
 - c) Training/accreditation program affiliation
 - d) Gender
 - e) Age
5. Does trainee self-efficacy differ in relation to the demographic variables listed in question four?
6. Does trainee religion/spirituality awareness differ in relation to the demographic variables listed in question four?

Religious/Spiritual affiliation was divided into Christian and Non-Christian.

Ethnicity was divided into Caucasian and Non-Caucasian. Training/accreditation program affiliation was identified as CACREP and CSWE. Gender was male and female.

Age was identified as: less than 25 years old; 25-30; 31-36; 37-40; 41-49; and 50 plus

years old. Descriptive frequencies, percentages, and number of participants were compiled into a Demographics Table to assist in clarification of the sample.

Descriptive statistics were compiled into appropriate tables for Correlations in research questions one through three that provide the means, standard deviations, significance .05 (2-tailed) and the number of participants. Descriptive statistics were compiled in appropriate tables for ANOVAs and appropriate post-hoc tests for research questions four through six that included the number of participants, means, standard deviations, F-tests and trend analyses as appropriate, and effect sizes to show the degree of association for the total variances.

Limitations of the Study

The sample used in this research consisted of self-selected master's level students from CACREP and CSWE accredited institutions. Invitations for participation were e-mailed to professors in each program asking them to post the invitation for student participation on their program listserv. Students were able to click on the survey web address listed in the invitation to take the survey. The survey was anonymous with no way to track whether the professors posted the invitation. Web-based surveys limit access to those with Internet access and those willing to participate (Anderson & Kanuka, 2003).

Delimitations of the Study

The counseling behaviors listed in the Counselor Self-Efficacy Scale (Baker, 1989; Johnson et al., 1989), were developed with counselor education trainees in mind. The behaviors were compared to the clinical competencies of social work master's level students listed in a new self-efficacy measure developed by Holden, Meenaghan, Anastas, and Metrey (2002). The initial clarity and appropriateness pilot with 16 social

work, counseling students, and professionals provided feedback about the structure and content of the surveys with positive results. The general behaviors were similar and appeared to be understandable for each discipline. The differing skills or training for different disciplines were not considered separately in surveys or statistical analysis.

Literature was extensively reviewed when selecting the spirituality measure. Of the many instruments, the Psychomatrix Spirituality Inventory (Wolman, 2001) met the researcher's criteria of being more spiritually oriented while taking religion into consideration. Because spirituality has been considered to encompass religion and spirituality (Allan, 1994; Campbell, 1988; Kelly, 1995; Teasdale, 1999), it was determined to be the most inclusive instrument providing descriptive and not evaluative results of spiritual experience with values differentiated by gender.

The Religion/Spirituality Awareness Survey (Matthews, 2003) was developed by this researcher to measure basic knowledge, training, and awareness of some major religions/spiritualities. The survey was more informational than evaluative in design and was not inclusive of all religions or spiritual disciplines. Seven more prominent religions/spiritualities were identified in the survey based on literature and educational resources that agreed on the number of followers and popularity (Canda & Furman, 1999; Smith, 1999; Teasdale, 1999). Questions 8 and 11 were designed as descriptive questions and were not used in the total awareness (RSAS) score. The RSAS score reflects awareness for only those religion/spiritual affiliations listed in the survey and self-identified personal and skill development training within the program regarding religion/spirituality in counseling.

CHAPTER 4: RESULTS

This chapter presents the results based on analyses of data from the study. The first section includes demographics of the individuals participating in this study. Additional demographic information not part of hypotheses under investigation but related to variables in the study was included to give a fuller picture of the sample studied. The second section of this chapter presents procedures used and analyses of the results addressing research questions under investigation. Tables were included when appropriate for detailed presentation of the correlations and ANOVA results. Percentages, post-hoc results, trends, and effect sizes were also reported as appropriate. In addition, when unequal sample sizes and unequal variances were present, Welch's adjusted values were reported (Glass & Hopkins, 1996).

Demographics

Of the 325 CACREP and CSWE universities invited to participate, 25% of CSWE universities' students responded ($n = 252$; 19 males, 233 females), and 30% of CACREP universities' students responded ($n = 171$; 17 males, 154 females). Further information regarding the universities and participants were as follows: (a) 2% ($n = 5$) of the universities on the CACREP and CSWE lists ($n = 330$) had no e-mail contacts listed, no website available for obtaining the program listings of faculty, and were not invited; (b) 3% ($n = 9$) of those universities invited ($n = 325$) to participate refused; (c) 14% ($n = 59$) of student participants ($N = 423$) responded to this researcher through e-mail requesting overall survey results or made comments about the survey; (d) 1% ($n = 4$) of the student participants responded through e-mail to this researcher with negative comments regarding the apparent biases in the language of the spirituality survey; (e) 5% ($n = 20$) of

the student participants responded through e-mail with positive comments regarding the survey as a whole; (f) 75% ($n = 315$) of the participants self-classified as Christian, and (g) 25% ($n = 108$) of the participants self-classified as non-Christian with at least 38 different religious/spiritual affiliations specified; (h) 35% ($n = 146$) of the participants reported taking a course in their program that gave specific training in religious/spiritual issues in counseling.

Some of the accredited CACREP and CSWE universities invited to participate in the study were either self-identified as a Seminary ($n = 1$) or various affiliations of religious institutions ($n = 3$). For the 423 participants responding to the survey, 29% ($n = 123$) reported no prior training or education in religion/spirituality. There were 71% ($n = 300$) reporting prior education or training in religion/spirituality that ranged from a specific religion's training for members to seminars, classes, and prior master's degrees in divinity or religion. The student participants reported being (a) Caucasian ($n = 368$; 87%); or (b) Non-Caucasian ($n = 55$; 13%) with 54 of the participants specifying 18 different non-Caucasian ethnicities. Therefore, the generalized variable of ethnicity, identified as Caucasian and non-Caucasian was used for analyses in this study.

Table 1 presents detailed demographic information about the participants for this study. Demographics were presented by training/accreditation program affiliation in order to offer a more detailed description of the sample.

Table 1

Frequencies and Valid Percentages by Training/Accreditation Program Affiliation

Demographics <i>N</i> = 423	Counseling Trainees (CACREP) (<i>n</i> = 171) <i>n</i> (%)	Social Work Trainees (CSWE) (<i>n</i> = 252) <i>n</i> (%)
Religious Affiliation		
Christian	130 (76%)	185 (73%)
Non-Christian	41 (24%)	67 (27%)
Religious/Spiritual Affiliation		
Catholicism	24 (14%)	44 (18%)
Protestantism	57 (33%)	95 (38%)
Judaism	3 (2%)	12 (5%)
Islam	0	2 (1%)
Hinduism	2 (1%)	0
Buddhism	3 (2%)	5 (2%)
New Age	6 (4%)	6 (2%)
Other	25 (15%)	24 (10%)
Gender		
Male	17 (10%)	19 (8%)
Female	154 (90%)	233 (93%)

Note. Percentages rounded to the nearest whole number and totals may be more or less than 100%.

Table 1 (continued)

Frequencies and Valid Percentages by Training/Accreditation Program Affiliation

Demographics	Counseling Trainees (CACREP) (<i>n</i> = 171) <i>n</i> (%)	Social Work Trainees (CSWE) (<i>n</i> = 252) <i>n</i> (%)
<i>N</i> = 423		
<hr/>		
Ethnicity		
Caucasian	149 (87%)	219 (87%)
Non-Caucasian	22 (13%)	33 (13%)
Non-Caucasian Ethnicity		
African American	7 (4%)	14 (6%)
Native American	1 (1%)	3 (1%)
Hispanic	2 (1%)	7 (3%)
International	3 (2%)	5 (2%)
Multiracial	7 (4%)	3 (1%)
Other	1 (1%)	1 (0.4%)*
<hr/>		
Age		
Less than 25	29 (17%)	72 (29%)
25 – 30	57 (33%)	85 (34%)
31 – 36	25 (15%)	25 (10%)
37 – 40	19 (11%)	17 (7%)
41 – 49	23 (14%)	32 (13%)
50 +	18 (11%)	21 (8%)

Note. Percentages rounded to nearest whole number; totals may not equal 100%.

* Exception to the rule of rounding to the nearest whole number

Reliability of Instruments

The instruments used in the study were multiple-item summated scales. A coefficient alpha was computed to determine the internal consistency reliability for each scale (Hatcher & Stepanski, 1994). The Counseling Self-efficacy Scale (CSES) was a 33-item questionnaire, which asked participants to rate their confidence in performing the counseling behavior on a Likert type scale of 0 to 10. The Psychomatrix Spirituality Inventory (PSI) was an 80-item questionnaire with a Likert scale ranging from 1 to 4. The Religion/spirituality Awareness Survey (RSAS) was a 9-item questionnaire with a Likert scale ranging from 0 to 3 and 2 open-ended questions.

Religion/Spirituality Awareness Survey

In the first set of eight questions, the observed value of None indicated that the participant had no knowledge of the religion/spirituality; Low indicated a little knowledge that the religion/spirituality exists; Moderate indicated that the participant could discuss some aspects of the religion/spirituality but did not know or understand all beliefs, rituals, or customs associated with the religion/spirituality; High indicated a strong conversational knowledge of terms, beliefs, rituals, and customs of the religion/spirituality. Question number eight, which asked participants to list any other religions/spiritualities and rate their awareness, was removed due to the high number of missing values.

The final question was an informational open-ended question intended to assist in recognizing training in programs that address religious and/or spiritual issues in counseling. After reviewing the variety of courses listed by participants responding to the question (59.1%; $n = 250$), it was determined that this question would be used as a

description of the participants rather than use a coding method to determine common content at this time. Calculating the mean for questions 1-7, 9, 10, provided an awareness score for each participant on the RSAS.

The RSAS reliability was estimated as acceptable and strong in this study with Cronbach's coefficient alpha .71 (Nunnally, 1978; Miller & Salkind, 2002) when leaving question 8 and question 11 out of the analysis. These two questions were descriptive and were not answered by all participants in the study and were not used in the total awareness score. The RSAS score reflects awareness for only those religion/spiritual affiliations listed in the survey and self-identified personal and skill development training within the program of participants regarding religion/spirituality in counseling.

Counseling Self-efficacy Scale

With the author's permission (Appendix B), this researcher added to the instructions (Appendix C) to direct participants to: (a) recognize the inclusion of religious/spiritual issues and/or backgrounds in discussions with a client, (b) be reminded of the counselors' ethical obligations not to try to change or influence client beliefs or orientation with regard to religion/spirituality, and to (c) specifically rate self-efficacy with regards to dealing with or addressing the religious/spiritual as indicated in the counseling behaviors.

The scale was modified for a web-based format by instructing participants to simply rate each of the 33 counseling behaviors on a scale of 0 (no confidence) to 10 (complete confidence) using numbers on the scale (0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10) as they go through the list thinking about their level of confidence in performing each counseling behavior. Adding the ratings and dividing by 33 determined total CSES scores.

Scale reliability for the modified version used in this study was estimated by calculating a coefficient alpha that was .97, revealing a strong and reliable measure as modified for the survey.

Psychomatrix Spirituality Inventory

Seven factors were developed that describe the spiritual experience and behavior of those completing the inventory. The factors are: (a) Divinity: the sense of connection to a God figure or divine energy source; (b) Mindfulness: awareness of the interconnection of the mind and body, with an emphasis on practices that enhance that relationship; (c) Intellectuality: a cognitive, inquiring approach to spirituality, with a focus on reading and discussing sacred texts; (d) Community: the quality of spirituality enacting connection to the community at large, whether in charity or politics; (e) Extrasensory perception: spiritual feelings and perceptions associated with non-rational ways of knowing, including prophetic dreams and near-death experiences; (f) Childhood spirituality: a personal historical association to spirituality through family tradition and activity; (g) Trauma: a stimulus to spiritual awareness through experiencing physical or emotional illness or trauma to self or loved ones (Wolman, 2001, pp. 2-3).

Scores for each item in a factor of the PSI were added together and divided by 7 to give a factor score. A grid was used to determine whether a person scored high, moderate, or low according to gender. The total mean score for the seven factors, a measure added by this researcher, was calculated to give females Total Factor Scores of: (a) high ranging 2.6 or higher, (b) moderate score ranging 2.0 to 2.5, or (c) low score ranging from less than 1.9 and for males (d) high score of 2.4 or higher, (e) moderate

score ranging 1.8 to 2.3, or (f) low score ranging less than 1.7. The Total Factor Score indicated a total spirituality score used for correlations with the other variables.

For this researcher's study, scale reliability was estimated with a Cronbach's coefficient alpha = .93 for the items in the scale. The coefficient alpha for the Total Factor Score was .78 while each factor was: Divinity = .70; Mindfulness = .78; Extrasensory Perception = .76; Community = .72; Intelligence = .72; Trauma = .78; and Childhood Spirituality = .78. Each coefficient exceeded the minimum value of .70 recommended by Nunnally (1978) indicating strong reliability whether using factor scores or the total factor score.

Research Questions

The first three research questions were addressed with Pearson correlations, used to test association (Hatcher & Stepanski, 1994). Descriptive analyses of data, as shown in Table 2, revealed that the CSES distributions were negatively skewed (-.77) and had a leptokurtic trend (1.62). In addition, the PSI Total Factor Score, and the Factors of Divinity and Intellectuality were negatively skewed (-.36, -.88, -.03). However, each of the scales used had an absolute maximum and minimum (CSES, 0 – 10; PSI, 1 – 4; RSAS, 0 – 3) and there was no reason to expect that the sample means would not be near normal with the size of the sample used. Therefore, the Pearson Correlation Coefficient test was robust to violations from the model assumptions for the sample size used in this study (Miller & Salkind, 2002).

Research questions 4, 5, and 6 were addressed using a One-Way Analysis of Variance, between-groups design. The Levene's test was used to test for homogeneity of variance and the Welch's adjusted value was reported when significant unequal variances

were detected (Glass & Hopkins, 1996).

Research Questions 1 - 3

The first three research questions were to determine whether there was a relationship between the trainee self-efficacy (CSES) and spirituality (PSI Total Factor), the seven factors (Divinity; Mindfulness; Extrasensory Perception; Community; Intellectuality; Trauma; Childhood Spirituality) of spirituality, and the religion/spirituality awareness survey (RSAS).

Table 2

Mean, Standard Deviation, Skewness, and Kurtosis for CSES, PSI, PSI Factors, RSAS

<i>N</i> = 423	Mean	SD	Skewness	Kurtosis
CSES	7.80	1.15	-.77	1.62
PSI Total Factor Score	2.50	.39	-.36	-.24
RSAS	1.44	.44	.03	.42
Divinity	3.12	.75	-.88	.08
Mindfulness	2.60	.49	.16	-.27
Extrasensory perception	2.17	.51	.25	-.22
Community	2.29	.63	.12	-.81
Intellectuality	2.69	.46	-.03	-.14
Trauma	2.05	.38	.23	.01
Childhood spirituality	2.58	.79	-.08	-1.07

Note. CSES: A measure of Counselor Self-efficacy. PSI: A measure of spirituality with a PSI Total Score and 7 Factor scores. RSAS: A measure of religion/spirituality awareness.

The correlation model was used to address the first three research questions. Data supported a relationship between each of the measures and CSES except for Childhood Spirituality ($r = .082$). There was a positive correlation between each of the measures in relation to the CSES, as shown in Table 3. However, the strongest relationship ($r = .267$) was between CSES and PSI Total Factor revealing that although there was significance, there was only a slight relationship between the measures.

Table 3

Correlation Coefficient for PSI, PSI Factors, RSAS, to CSES

<i>N</i> = 423	1	2	3	4	5	6	7	8	9	10
1. CSES	-	.267**	.176**	.218**	.223**	.191**	.246**	.183**	.082	.129**
2. PSI Total		-	.827**	.508**	.613**	.771**	.787**	.434**	.646**	.309**
3. Divinity			-	.231**	.443**	.623**	.650**	.185**	.488**	.145**
4. Mindfulness				-	.394**	.243**	.374**	.360**	.052	.311**
5. Extrasensory					-	.247**	.354**	.525**	.131**	.149**
6. Community						-	.626**	.120*	.520**	.222**
7. Intellectuality							-	.310**	.388**	.353**
8. Trauma								-	-.011	.199*
9. Childhood									-	.154*
10. RSAS										-

**Correlation is significant at the 0.01 level (2-tailed)

*Correlation is significant at the 0.05 level (2-tailed)

The PSI Total Factor Score, with the highest positive correlation to CSES, accounts for 7% of the variance in CSES and Intellectuality accounts for 6% of the variance in CSES. RSAS accounts for only 2% of the variance in CSES. However, RSAS accounts for 10% of the variance in the PSI Total Factor Score and Mindfulness, and

13% of the variance in Intellectuality. These percentages were a result of squaring the correlation coefficients to provide the coefficient of determination, which gives the best indication of the meaningfulness or significance of a correlation coefficient (Miller & Salink, 2002).

Research Questions 4-6

The last three research questions were to determine whether trainee self-efficacy (CSES), spirituality (PSI Total Factor Score, each of the seven Factors), and religion/spirituality awareness (RSAS) differ in relation to the demographic variables: (a) Religious/spiritual affiliation (Christian, Non-Christian); (b) Ethnicity (Caucasian, Non-Caucasian); (c) Training/accreditation program affiliation (CACREP, CSWE); (d) Gender; and (e) Age.

Levene's Test for homogeneity of variance for CSES, PSI Total Factor, RSAS, and each PSI Factor suggested that the variances were equal and the assumptions justified for most of the variables. However, Welch's adjusted values were used due to significant unequal variances for: (a) PSI Total Factor Score, Divinity, Mindfulness, Community, Childhood Spirituality to Religion; (b) PSI Total Factor Score, Divinity, and Intellectuality to Age. Levene's test for homogeneity of variance and Box's test for equality of covariance matrices for all variables showed equal variance and covariance assumptions justified for Gender. Tables for ANOVAs present only those variable means that were significantly different ($p < .05$).

Training/Accreditation Program Affiliation. Self-efficacy (CSES), spirituality (PSI Total Factor, each of the seven Factors), and awareness (RSAS) means were examined according to training/accreditation program affiliation. The results of the

Analysis of Variance showed no significant difference in means for each variable with respect to CACREP or CSWE programs.

Gender. The only significant differences in the measures due to gender were found between males ($n = 36$; $M = 1.61$, $SD = .50$) and females ($n = 387$; $M = 1.42$, $SD = .43$) for RSAS, $F(1, 421) = 5.84$, $p = .016$. However, gender only accounts for 1% ($\eta^2 = .117$) of the variance in RSAS.

Ethnicity. There was no significant difference in means for RSAS, Mindfulness, Trauma, or Childhood Spirituality with respect to ethnicity. Table 4 presents the measures differing significantly by ethnicity. Ethnicity accounts for 1% of the variance in CSES, Divinity, Community, and Intellectuality, and 2% of the variance in PSI Total Factor Score and Extrasensory Perception.

Table 4

CSES, PSI, PSI Factors Differing Significantly by Ethnicity

<i>(n = 368)</i>		Caucasian			
<i>(n = 55)</i>	Non-Caucasian	Mean	SD	<i>F</i> -test/significance	Effect Size
CSES	Caucasian	7.76	1.16	$F(1, 421) = 4.49$	$\eta = .103$
	Non-Caucasian	8.11	1.07	$p = .035$	
PSI Total	Caucasian	2.48	.38	$F(1, 421) = 6.43$	$\eta = .123$
	Non-Caucasian	2.63	.40	$p = .012$	
Divinity	Caucasian	3.09	.77	$F(1, 421) = 5.75$	$\eta = .116$
	Non-Caucasian	3.35	.62	$p = .017$	
Extrasensory	Caucasian	2.15	.51	$F(1, 421) = 7.00$	$\eta = .128$
	Non-Caucasian	2.34	.54	$p = .008$	
Community	Caucasian	2.27	.62	$F(1, 421) = 4.05$	$\eta = .098$
	Non-Caucasian	2.45	.69	$p = .045$	
Intellectuality	Caucasian	2.67	.46	$F(1, 421) = 4.25$	$\eta = .100$
	Non-Caucasian	2.81	.48	$p = .040$	

Table only presents variable means that were significantly different ($p < .05$)

Religion/Spiritual Affiliation. Table 5 presents the measures differing significantly by religion/spiritual affiliation of Christian and Non-Christian. Significant differences were not found for CSES, RSAS, Extrasensory Perception, and Trauma.

Religion/spiritual affiliation accounted for 19% of the variance in Divinity, 18% of the variance in Childhood Spirituality, 12% of the variance in Community, 11% of the

variance in PSI Total Factor Score, and 3% of the variance in both Mindfulness and Intellectuality. Christians tended to score higher than non-Christians except in the factor of Mindfulness.

Table 5

PSI, PSI Factors Differing Significantly by Religion/Spiritual Affiliation

(n = 315)	Christian				
(n = 108)	Non-Christian	Mean	SD	F-test/significance	Effect Size
PSI Total	Christian	2.58	.35	$F(1, 163.01) = 42.71^*$	$\eta = .326$
	Non-Christian	2.29	.41	$p = .000^*$	
Divinity	Christian	3.31	.61	$F(1, 145.88) = 69.62^*$	$\eta = .431$
	Non-Christian	2.57	.86	$p = .000^*$	
Mindfulness	Christian	2.55	.46	$F(1, 157.99) = 12.23^*$	$\eta = .185$
	Non-Christian	2.76	.57	$p = .001^*$	
Community	Christian	2.42	.61	$F(1, 208.13) = 66.64^*$	$\eta = .351$
	Non-Christian	1.92	.54	$p = .000^*$	
Intellectuality	Christian	2.74	.46	$F(1, 421) = 11.03$	$\eta = .160$
	Non-Christian	2.57	.44	$p = .001$	
Childhood Spirituality	Christian	2.77	.74	$F(1, 210.41) = 108.02^*$	$\eta = .428$
	Non-Christian	2.00	.65	$p = .000^*$	

Table only presents variable means that were significantly different ($p < .05$).

*Welch's adjusted value for unequal variances.

Age. The means differing significantly by age are represented in Table 6, 7, and 8.

Age revealed no significant difference for RSAS and Childhood Spirituality. The highest

percentages of variance accounted for by age were found in the measures of Trauma (9%), and PSI Total Factor Score (8%). The least amount of variance was found in Intellectuality (3%). Post-hoc tests were used to detect the significant differences between the age groups. Trend analysis was used as a more informative test in order to examine statistically the nature of the relationship as a linear or non-linear pattern and weighted values were used due to unequal sample sizes (Glass & Hopkins, 1996; Hatcher & Stepanski, 1994).

Table 6

CSES, PSI Total Factor Scores, Differing Significantly by Age

Variable	Age	<i>n</i>	Mean	SD	<i>F</i> -test/significance	Effect Size
CSES	< 25	101	7.53	1.22	<i>F</i> (5, 417) = 4.74 <i>p</i> = .000	<i>η</i> = .232
	25 – 30	142	7.63	1.06		
	31 – 36	50	7.96	1.15		
	37 – 40	36	8.18	1.13	Linear trend (Weighted)	
	41 – 49	55	8.04	1.13	<i>F</i> (1, 417) = 21.26	
	50 +	39	8.28	1.09	<i>p</i> = .000	
PSI Total	< 25	101	2.38	.42	<i>F</i> (5, 138.78) = 6.76*	<i>η</i> = .273
	25 – 30	142	2.44	.35	<i>p</i> = .000*	
	31 – 36	50	2.57	.42	Linear trend (Weighted)	
	37 – 40	36	2.62	.36	<i>F</i> (1, 417) = 31.06 <i>p</i> = .000	
	41 – 49	55	2.61	.31		
	50 +	39	2.68	.36		

*Welch's adjusted value for unequal variances. All significant values presented ($p < .05$).

Table 7

Divinity, Mindfulness, and Extrasensory Perception Differing Significantly by Age

Variable	Age	<i>n</i>	Mean	SD	<i>F</i> -test/Significance	Effect Size
Divinity	< 25	101	2.96	.88	$F(5, 140.46) = 5.06^*$	$\eta = .229$
	25 – 30	142	3.00	.71	$p = .000^*$	
	31 – 36	50	3.21	.74	Linear trend (Weighted)	
	37 – 40	36	3.29	.64		
	41 – 49	55	3.40	.61	$F(1, 417) = 21.12$	
	50 +	39	3.36	.71	$p = .000$	
Mindfulness	< 25	101	2.44	.47	$F(5, 417) = 5.03$	$\eta = .238$
	25 – 30	142	2.58	.50	$p = .000$	
	31 – 36	50	2.68	.56	Linear trend (Weighted)	
	37 – 40	36	2.65	.40		
	41 – 49	55	2.71	.51	$F(1, 417) = 22.60$	
	50 +	39	2.84	.44	$p = .000$	
Extrasensory Perception	< 25	101	2.00	.43	$F(5, 417) = 5.37$	$\eta = .246$
	25 – 30	142	2.14	.52	$p = .000$	
	31 – 36	50	2.25	.52	Quadratic trend (Weighted)	
	37 – 40	36	2.43	.55		
	41 – 49	55	2.29	.55	$F(1, 417) = 7.36$	
	50 +	39	2.25	.47	$p = .007$	

Table only presents variable means that were significantly different ($p < .05$).

*Welch's adjusted value for unequal variances.

Table 8

Community, Intellectuality, and Trauma Differing Significantly by Age

Variable	Age	<i>n</i>	Mean	SD	<i>F</i> -test/Significance	Effect Size
Community	< 25	101	2.21	.66	<i>F</i> (5, 417) = 3.84	<i>η</i> = .210
	25 – 30	142	2.17	.59	<i>p</i> = .002	
	31 – 36	50	2.37	.69	Linear trend (Weighted)	
	37 – 40	36	2.43	.61		
	41 – 49	55	2.46	.53	<i>F</i> (1, 417) = 15.87	
	50 +	39	2.50	.63	<i>p</i> = .000	
Intellectuality	< 25	101	2.63	.54	<i>F</i> (5, 140.59) = 2.85*	<i>η</i> = .176
	25 – 30	142	2.63	.43	<i>p</i> = .018*	
	31 – 36	50	2.75	.49	Linear trend (Weighted)	
	37 – 40	36	2.79	.37		
	41 – 49	55	2.73	.39	<i>F</i> (1, 417) = 10.52	
	50 +	39	2.86	.43	<i>p</i> = .001	
Trauma	< 25	101	1.88	.34	<i>F</i> (5, 417) = 8.48	<i>η</i> = .304
	25 – 30	142	2.05	.37	<i>p</i> = .000	
	31 – 36	50	2.06	.40	Linear trend (Weighted)	
	37 – 40	36	2.19	.39		
	41 – 49	55	2.14	.36	<i>F</i> (1, 417) = 34.65	
	50 +	39	2.25	.30	<i>p</i> = .000	

Table only presents variable means that were significantly different ($p < .05$).

*Welch's adjusted value for unequal variances.

Trend analysis showed an overall positive linear trend that revealed each group scoring significantly higher than the younger group with the 50 plus group scoring the highest for most of the comparisons. An occasional bend was noted at the 37 – 40 age groups but only the Extrasensory Perception factor showed a significant Quadratic trend with the downward curve beginning in the 37 – 40 age group, as noted in Table 7.

CHAPTER 5: DISCUSSION

This chapter provides a section on the (a) summary and discussion of the results, (b) conclusions, (c) limitations of the study, (d) implications for counseling and social work, and (e) recommendations for future research. The purpose of this study was to explore the relationships of counseling/social work trainee spirituality and religion/spirituality awareness to trainee self-efficacy in counseling clients with religious/spiritual issues and/or backgrounds. In addition, the study assessed the influence of demographic variables on spirituality, religion/spirituality awareness, and self-efficacy including: (a) religious/spiritual affiliation, (b) ethnicity, (c) training/accreditation program affiliation, (d) gender, and (e) age.

The research design was a correlational design utilizing web-based survey methodology on a secure server at a Midwestern university. Web-based surveys offer an advantage of looking similar to paper-based surveys and being simple to manage when participants are most likely familiar with computer type surveys, and the researcher has a limited budget (Anderson & Kanuka, 2003). No identifying information that would allow follow-up or later identification of the participant was obtained during the survey. Participants were informed (Appendix H) of the implied consent as they entered the website.

Summary and Discussion

Research Questions 1 -3

The first three research questions were to determine whether there was a relationship between trainee self-efficacy (CSES) and spirituality (PSI Total Factor), each of the seven factors (Divinity, Mindfulness, Extrasensory Perception, Community,

Intellectuality, Trauma, and Childhood Spirituality) of spirituality, and the religion/spirituality awareness survey (RSAS).

The study revealed a relationship between each of the measures and CSES except for Childhood Spirituality ($r = .082$). The strongest relationship ($r = .267$) was between CSES and PSI Total Factor revealing that although there was significance, there was only a slight relationship between the measures. The PSI Total Factor Score and Intellectuality accounted for the highest positive correlation to CSES. Further investigation revealed that RSAS accounted for only 2% of the variance in CSES and accounts for much more of the variance in the PSI Total Factor Score, Mindfulness, and the variance in Intellectuality.

The results suggested that religion/spirituality awareness influenced spirituality which in turn influenced self-efficacy in the participants. This result of the study suggested that the participants' awareness and training may have contributed to self-efficacy which indicated their confidence in performing the counseling behaviors in the measure that specifically addressed religious/spiritual issues and/or backgrounds with a client in the counseling setting. As trainees gain more awareness or experience and develop counseling skills, their self-efficacy may gain strength (Bandura, 1995; Johnson et al., 1989; Maddux & Stanley, 1986; Rushlau, 1998). Bandura (1989) developed the self-efficacy theory that suggested performance of a behavior or task, in addition to knowledge and skills, requires belief in one's ability to produce desired outcomes.

Research Questions 4 - 6

The last three research questions were to determine whether trainee self-efficacy (CSES), spirituality (PSI Total Factor Score and each of the seven Factors), and religion/spirituality awareness (RSAS) differ in relation to the demographic variables. No

significant differences were found in training/accreditation program affiliations and only slight significance in gender. Ethnicity, religious/spiritual affiliation, and age showed significant differences in some of the measures.

Training/Accreditation Program Affiliation. The results indicated no significant difference in means for each variable with respect to CACREP or CSWE programs. These results indicated that though the programs differ in specializations and some specific content, the training received by participants may be similar with respect to counseling behaviors, and spirituality and awareness development measured in this study. This result was consistent with similarities noted in each program that indicated training in counseling skills and the importance of diversity and awareness (ACA, 1995; NASW, 1996).

Gender. Only the RSAS showed significant differences with respect to gender, with males scoring slightly higher than females. The low to moderate score on RSAS showed that the male participants had slightly more knowledge and training towards the religions/spiritualities listed in the survey and could discuss some aspects of the religions/spiritualities but still did not know or understand all terms, beliefs, rituals, or customs associated with the religion/spirituality. There were no significant differences in the scores with respect to gender on the PSI or the CSES for this study.

Gender showed no significant effect on the PSI Total Factor Score or the seven Factors. This was not the case for the original PSI study by Wolman (2001) which revealed that women showed significantly higher factor scores in spirituality than men and may be more comfortable with spiritual language or descriptions. Wolman's study had many more participants ($N = 4737$) and showed that women did, in fact, score

slightly higher than men on each of the factors except in the factors of Community and Intellectuality.

Ethnicity. There was no significant difference in means for RSAS, Mindfulness, Trauma, or Childhood Spirituality with respect to ethnicity. Measures differing significantly by ethnicity were CSES, Divinity, Community, and Intellectuality, PSI Total Factor Score, and Extrasensory Perception. Non-Caucasians scored higher than Caucasians on each of the measures that revealed significant differences in the means. This result may be influenced by the differences in cultures that often place more emphasis on religious/spiritual beliefs or become more aware of other cultural beliefs as they encounter them in their lives (Coughlin, 1992; Richardson, 1991; Smith, 1991; Teasdale, 1999). The church has historically been a supportive influence in the lives of African-Americans and Hispanic Americans, which are two of the larger non-Caucasian groups in this study (Johnson & Barer, 1990; Starrett, Rogers, & Decker, 1992; Williams, Griffins, Young, Collins, & Dobson, 1999).

Although non-Caucasians scored higher than Caucasians, there were only slight differences in the scores. The basic interpretations for the factor scores that follow were taken from Wolman's (2001) book that offered much more detailed explanations for scores. The scores for Divinity indicated the possibility of: (a) high sense of connection to a God figure or divine energy source, (b) often experiencing beauty in nature, (c) attention to personal religious/spiritual rituals, (d) strong interest in the wellbeing of others, (e) less faith in scientific explanations in confusing life situations, (f) recognition that humans are here for a purpose, and (g) experiences with miracles or the unexplained results/events in life.

High scores in Extrasensory Perception indicated possible spiritual feelings and perceptions associated with non-rational ways of knowing such as prophetic dreams and near-death experiences such as: (a) sensing something is about to happen, (b) sensing the presence of loved ones no longer living, (c) out of body and past lives experiences.

Scores on the factor of Community were high indicating the quality of spiritual enacting connection to the community at large which may indicate: (a) involvement in a wide variety of activities both inclusive of others and volunteer charities; (b) participation in classes, services, seminars and with spiritual leaders related to religion/spirituality; (c) a desire for spiritual consciousness in professional caregivers; (d) commitment of time toward school, civic and political activities, and a spiritual community.

Intellectuality factor scores that were high indicated a possible cognitive inquiring approach to spirituality, with a focus on reading, studying, and discussing of sacred texts. Participants scoring high in this factor may: (a) find pleasure in the mental activity associated with spiritual experience; (b) ponder questions about existence of higher powers, life, death, and immortality of the soul; (c) have thoughts of returning after death in a new life form; (d) be highly responsive to music, theater, and the arts; (e) discuss spirituality openly and question the teachings of traditional religion.

Religion/Spiritual Affiliation. Significant differences were not found for CSES, RSAS, Extrasensory Perception, and Trauma with respect to religion/spiritual affiliation as Christian and non-Christian. However, religion/spiritual affiliation accounted for 19% of the variance in Divinity, 18% of the variance in Childhood Spirituality, 12% of the variance in Community, 11% of the variance in PSI Total Factor Score, and 3% of the variance in both Mindfulness and Intellectuality.

Research has suggested that self-selected participants responding to surveys, including religious/spiritual matters, are often more interested in and have an inclination toward the subject matter of material involved (Anderson & Kanuka, 2003; Dillman, 2000; Wolman, 2001). Christians scored higher than non-Christians on the measures of PSI Total Factor Score, Divinity, Community, Intellectuality, and Childhood Spirituality. Non-Christians scored higher than Christians on the factor of Mindfulness. Research has suggested that many people residing in areas of the South and Southeast may tend toward strong Christian/religious affiliations and rate themselves high on spirituality (Graham, Furr, Flowers, & Burke, 2001; Hickson, Housley, & Wages (2000). Although it is unknown as to areas from which all participants responded, it has been suggested in literature that many Christians tend to value the religious/spiritual connections and may self-identify as strongly religious/spiritual and often find importance in addressing such issues in counseling (Faiver, O'Brien, & Ingersoll, 2000; Keating & Fretz, 1990; Richards & Bergin, 1997; Zinnbauer & Pargament, 2000).

Explanations for scores in Divinity, Community, and Intellectuality were discussed in the above section for Ethnicity and may be applied in a similar fashion for their significance in religion/spiritual affiliation. High scores on Childhood Spirituality may have indicated a personal historical association to spirituality through family traditions and activities in childhood. The activities often included being read to from a prominent book from the family religious tradition. Participants that scored high to moderate may have attended religious schools or training programs or recalled parents spoke often of God when they were children (Wolman, 2001).

Non-Christians scored higher on the factor of Mindfulness, which may have indicated more awareness of the interconnection of the mind and body, with an emphasis on practices that enhance that relationship. The participants that scored in the moderate range for Mindfulness may have set aside time in the day for contemplation and self-reflection but not on a regular basis. Meditation may be a pleasurable and useful aspect of their spiritual practice along with yoga, tai chi and other relaxation techniques. These participants may be aware of balance in various areas of life and seek out others of like mind to share ideas and concerns. Moderate scores in Mindfulness also may indicate a tendency to include their own ethical standards for guiding their actions and a willingness to forgive their own failings (Wolman, 2001).

Age. There was no significant difference revealed by age for RSAS and Childhood Spirituality. For the other measures, trend analysis showed an overall positive linear trend that revealed each group scoring significantly higher than the younger group with the 50 plus group scoring the highest for most of the comparisons. An occasional bend was noted at the 37 – 40 age groups but only the Extrasensory Perception factor showed a significant Quadratic trend with the downward curve beginning at the 37 – 40 age group.

The trend revealed in this study was similar to other studies that have found an increase in efficacy with increases in age (Friedlander & Snyder, 1983; Johnson et al., 1989; Larson et al., 1992; Melchert, Hays, Wiljanen, & Kolocek, 1996). As trainees transition through the developmental tasks, opportunities for learning and self-reflection may enhance progress and responsiveness to the needs of others (Chickering & Reisser, 1993; Glover, 2000). An individual's expectations that the knowledge and skills are

present to complete a task form the foundation for self-efficacy and are the end result of a cognitive appraisal process combined with personal and situational factors (Bandura, Adams, Hardy, & Howells, 1980).

Conclusions

Findings in this study indicated that there was a positive relationship between the trainee self-efficacy (CSES) and spirituality (PSI Total Factor), six of the seven factors (Divinity, Mindfulness, Extrasensory Perception, Community, Intellectuality, Trauma, Childhood Spirituality) of spirituality, and the religion/spirituality awareness survey (RSAS). No correlation was found between Childhood Spirituality and self-efficacy (CSES).

Results suggested that the participants' awareness and training (RSAS) may have contributed to self-efficacy (CSES), which indicated their confidence in performing the counseling behaviors in the measure that specifically addressed religious/spiritual issues and backgrounds with a client in the counseling setting. Self-rated spirituality indicated a relationship with self-efficacy in counseling clients with religious/spiritual issues and backgrounds. Positive correlations were also apparent between awareness and spirituality with awareness accounting for more of the variance in spirituality than in self-efficacy. Although not a definitive finding, a possible explanation is that participants in the survey may have had significant prior education, training, or exposure to other religions/spiritualities and/or classes in their programs that added to their awareness and spirituality scores. Participants with higher spirituality and religion/spirituality awareness scores tend to show higher self-efficacy scores.

Relationships were found between many of the demographic variables and trainee self-efficacy (CSES), spirituality (PSI Total Factor Score, each of the seven Factors), and religion/spirituality awareness (RSAS). No significant differences were found in the measures with respect to training/accreditation program affiliations and only slight significance in gender to awareness (RSAS). Christians scored higher than non-Christians on the measures of PSI Total Factor Score, Divinity, Community, Intellectuality, and Childhood Spirituality. Non-Christians scored higher than Christians on the factor of Mindfulness. Non-Caucasians scored higher than Caucasians on CSES, Divinity, Community, and Intellectuality, PSI Total Factor Score, and Extrasensory Perception.

The nature of the relationship between age and the measures revealed a positive linear trend for CSES, PSI Total Factor Score, and the factors of Divinity, Mindfulness, Community, Intellectuality, and Trauma. The results indicated that spirituality scores, related to the measures, increased with age. Similarly, self-efficacy scores increased as participants' age increased. Although the scores increased with age, the lowest scores were found in the less than 25 age group, which suggested a moderate confidence in performing the counseling behaviors and moderate levels of spirituality.

A quadratic trend was revealed between age and Extrasensory Perception with means progressing up to the 37 – 40 age group and then beginning a decline. A possible explanation, although not definitive, for the decline beginning at the 37 – 40 age group, relates to a change in values, beliefs, and meaning for situations of life as a participant ages and may conform to more conventional ways of knowing (Erikson, 1968; Wolman, 2001).

Limitations of the Study

In interpreting the results of the present study, readers should consider several limitations. The sample used in this research consisted of self-selected master's level students from CACREP and CSWE accredited institutions. Web-based surveys limit access to those with Internet access and those willing to participate and possibly most interested in the topic (Anderson & Kanuka, 2003). Results might not necessarily transfer to other trainees or subject areas related to self-efficacy, spirituality, and religious/spiritual awareness.

The PSI was not used as an evaluative tool but scores were compared to give more descriptive understanding of the participants in the study. Because spirituality has been considered to encompass religion and spirituality at times (Allan, 1994; Campbell, 1988; Kelly, 1995; Teasdale, 1999), the PSI was determined to be the most inclusive instrument providing descriptive and not evaluative results of spiritual experience. Much of the terminology and interpretations were of Christian origins and may not encompass terminology and interpretations of many of the world religions and philosophies.

The Religion/Spirituality Awareness Survey (Matthews, 2003) was developed by this researcher to measure basic knowledge, training, and awareness of some major religions/spiritualities. The survey was more informational than evaluative in design and was not inclusive of all religions or spiritual disciplines. Seven religions/spiritualities were identified in the survey based on literature and educational resources that agreed on the number of followers and popularity (Canda & Furman, 1999; Smith, 1999; Teasdale, 1999). The RSAS score reflects awareness for only those religion/spiritual affiliations

listed in the survey and self-identified personal and skill development training within the participants' programs regarding religion/spirituality in counseling.

Implications for Counseling and Social Work

Past research has not addressed the trainees' level of spirituality or religious/spiritual awareness and its relationship to counselor self-efficacy in dealing with these issues in counseling. Counseling and social work education programs have shown favorable support for the inclusion of training in religious and spiritual issues as evidenced by several articles and studies (Canda, 1988; Holland, 1989; Miller, 1999; Miranti & Burke, 1995; Sanzenbach, 1989; Sheridan et al., 1992).

Counseling and social work programs have not consistently implemented training in religion/spirituality due to low faculty self-efficacy in the areas of religion and spirituality (Sheridan & Wilmer, 1994; Young, Cashwell, Wiggins-Frame, & Belaire, 2002). With positive correlations for self-efficacy, spirituality and religion/spirituality awareness, counseling and social work programs, educators, and trainees may benefit from courses and experiences related to education and training in religious and spiritual beliefs, practices, terms, customs, and rituals.

Younger trainees may especially benefit from opportunities for enhancement of knowledge and skills development related to addressing religion/spirituality issues and backgrounds in clients. Results indicated that self-efficacy scores were lowest in trainees less than 36 years of age (69% of the participants) and higher as age increased up to 50 plus years old (31% of the participants). Lack of acknowledgment and preparation for dealing with religious and spiritual issues in counselor training may, in some way, encourage counselor insensitivity to clients' religious and spiritual issues (Hinterkopf,

1994). Burke and Hackney (1999) emphasized the importance of recognizing religious and spiritual aspects of counselor/trainee personality, in order to decrease the chances of unconscious imposition of personal values, biases, and beliefs onto clients.

Findings in this study may lend support to the development of courses and seminars designed to enhance student knowledge, skills, and self-awareness in the areas of religion/spiritual issues, beliefs, practices, customs, and rituals. Counseling and social work trainees may have less confidence when faced with counseling clients with religious/spiritual issues and backgrounds when their knowledge and awareness of religions/spiritualities and personal spirituality are low, as determined by the measures in this study. Self-awareness of personal beliefs and biases with regard to religion/spirituality could be enhanced with education and training in areas of world traditions in religion/spirituality and ethical considerations for counseling related to these issues.

For many years mental health professionals have addressed diversity issues of gender, ethnicity, and sexual orientation. Professionals have now been encouraged to approach spiritual issues within the context of counseling (Canda & Furman, 1999; Souza, 2002). Classes in Multicultural Counseling, Human Development, and Counseling Theories have addressed some aspects of religion/spirituality but may not offer the in-depth knowledge and awareness necessary for strong self-confidence when dealing with many of the religious/spiritual practices trainees may encounter in the counseling setting (ACA, 1995, Burke, 1999; CACREP, 2001; CSWE, 2003).

Practicum and internship for trainees may offer opportunities for supervised interventions and insight into the professionalism, awareness, and knowledge of trainees

in a variety of beliefs and traditions of religion/spirituality. Educators of counseling and social work trainees may benefit from continuing education related to religion/spirituality in order to provide the training to students necessary for the inclusion of such issues in counseling and education. Educators have acknowledged the importance of this issue in the past but have not felt comfortable in providing the necessary training and supervision that includes religion and spirituality issues (Kelly, 1994; Sheridan & Wilmer, 1994; Young et al., 2002).

Religion and spirituality have been recognized as relevant in counseling and training (Faiver, Ingersoll, O'Brien, & McNally, 2001; Hodge, 2001; Kelly, 1995; Sheridan & Hemert, 1999). Social work and counseling clinicians and students have reported concern that their education did not prepare them to address diverse issues of spirituality and religion (Canda, 1988; Dezerotes, 1995; Sheridan et al., 1992; Young et al., 2000). Burke and Miranti (1995) related that counselors must be comfortable with their own spiritual or religious beliefs, and biases, as they work with clients, and be prepared to deal with what exists for the client in search of understanding and growth.

Findings in this study suggest the importance and positive influence of implementing more extensive training and course work into counseling and social work education that prepares and increases self-efficacy in trainees for dealing with religion/spirituality within the counseling setting.

Recommendations for Further Research

Further investigation of trainee knowledge and awareness towards religious/spiritual issues and backgrounds may be beneficial in determining the direction of education and training for counseling and social work programs. Pretest/posttest

designs and qualitative studies may offer a clearer picture of the effects of training, supervision, awareness, and trainee spirituality related to counseling clients with religious/spiritual issues and backgrounds.

Future understanding related to religion/spirituality in counseling and social work may benefit from comparisons of intervention strategies and the types of issues clients bring to the therapeutic settings. Cultures and belief systems may vary within traditions, and research on specific belief systems brought to counseling settings by clients may enhance counselor and trainee awareness and understanding of client needs and goals.

Client views of the world and purpose in life may be closely linked to the religious/spiritual traditions they adhere to in life. An understanding of these views and the traditions or belief systems from which they come, may enhance treatment goals and intervention strategies in counseling. Similarly, trainee self-awareness in purpose, meaning, and religious/spiritual beliefs may be explored in more detail through quantitative and qualitative measures and approaches in order to better understand the influence and needs for training and self-efficacy and the role of religion/spirituality in counseling and social work education.

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APPENDIXES

Appendix A

Religion/Spirituality Awareness Survey (Matthews, 2003) Instructions Without Web-Based Format for RSAS

Please rate your level of knowledge regarding these religious/spiritual affiliations including their related terms, beliefs, rituals, and customs.

NONE = No Knowledge

LOW = Knowledge that the religion exists

MODERATE = Can discuss some aspects of the religion but do not know or understand all terms, beliefs, rituals, or customs associated with the religion

HIGH = Strong conversational knowledge of terms, beliefs, rituals, and customs of the religion

1. Catholic

☐ None

☐ Low

☐ Moderate

☐ High

2. Protestant

☐ None

☐ Low

☐ Moderate

☐ High

3. Judaism

☐ None

☐ Low

☐ Moderate

☐ High

4. Islam

☐ None

☐ Low

☐ Moderate

☐ High

5. Hinduism

☐ None

☐ Low

☐ Moderate

☐ High

Appendix A (Continued)

6. Buddhism

- ☐ None
☐ Low
☐ Moderate
☐ High

7. New Age

- ☐ None
☐ Low
☐ Moderate
☐ High

8. Other _____

- ☐ None
☐ Low
☐ Moderate
☐ High

Please rate the level of training you have received in your program regarding religion/spirituality in counseling for personal and skill development.

NONE = No Training

LOW = Incidental reference in one or two classes

MODERATE = More than two instances with class time dedicated to the topic, stimulating more study

HIGH = At least one course dedicated to training regarding religion/spirituality

9. Personal Development

- ☐ None
☐ Low
☐ Moderate
☐ High

10. Counseling Skill Development

- ☐ None
☐ Low
☐ Moderate
☐ High

11. Please list any courses you have taken in your program that you believe have given you specific training in dealing with religious and/or spiritual issues in counseling.

Appendix B

Permission to use Counselor Self-efficacy Scale (CSES)

From Stanley Baker <stanley_baker@ncsu.edu>
Sent Tuesday, July 29, 2003 7:03 am
To pjmatth@uark.edu

Subject Re: CSES

Yes to all of your questions. I am away from the office until mid-August and unable to prepare a formal letter until then. Send me a reminder some time after August 15th for the formal letter when needed. Best wishes with your study.

Stan Baker

Dr. Baker,
I will begin a doctoral dissertation in the fall that would study a counselor/social work trainee's spirituality levels and self-efficacy levels related to counseling clients with spiritual and religious issues. During my literature search, I found your instrument "Counselor Self-Efficacy Scale" and am interested in using it to measure self-efficacy levels of trainees in my study.

The ETS Test Collection provided a copy of your instrument and the means to contact you. I have a few questions:

1. May I use this instrument with proper acknowledgment and provide you with data for your own use free of charge?
2. May I add to the directions in the survey to direct the participant to answer about their abilities pertaining to religious and/or spiritual issues?
3. If permission is granted, would you send a formal letter stating that fact and any stipulations?

Thank you for your consideration and assistance.

Sincerely,

Pam Matthews

Pam J. Matthews, MSW, LCSW
Doctoral Student, Counselor Education
University of Arkansas
P. O. Box 1002
Fayetteville, AR 72702

Appendix B (Continued)

From Stanley Baker <stanley_baker@ncsu.edu>
Sent Monday, November 3, 2003 6:03 pm
To pjmatth@uark.edu
Subject Re: CSES revisions

Thank you for sharing the revisions with me. You have my approval to use the CSES with the revisions indicated. In so doing, please place the following information at the top of the instruments as a heading; Counselor Self-Efficacy Scale (Baker, 1989): Directions and Items Modified for Situation-Specific Research (P. J. Matthews, 2003). How does this work with you?

SB

From pjmatth@uark.edu
Sent Friday, October 31, 2003 11:11 pm
To Stanley Baker <stanley_baker@ncsu.edu>
Subject CSES revisions
Attachments QUESTIONS2.doc CSES
38K

Dr. Baker,

Thank you again for allowing me to use the CSES. I have attached a copy of the additions proposed for use in my survey in order to be more specific to self-efficacy in counseling clients with religious/spiritual issues. Please let me know if you have any suggestions or concerns.

The copy in the ETS tests collection was either numbered wrong or was missing a question. Number 4 was not on their copy, it skipped from 3 to 5. There were 33 questions and not 34.

I look forward to your comments in the near future.

Pam J. Matthews, MSW, LCSW
Doctoral Student, Counselor Education
University of Arkansas
P.O. Box 1002
Fayetteville, AR 72702

From Stanley Baker <stanley_baker@ncsu.edu>
Sent Tuesday, November 4, 2003 3:32 pm
To pjmatth@uark.edu
Subject Re: CSES revisions
There was no missing question. The numbering was off.

SB

Appendix B (Continued)

North Carolina State University is a land-grant university and a constituent institution of The University of North Carolina

Department of Educational Research
and Leadership and Counselor Education
College of Education

NC STATE UNIVERSITY

Educational Research & Leadership
608 Poe Hall
Campus Box 7801
Raleigh, NC 27695-7801
919.515.3127

Counselor Education
520 Poe Hall
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919.515.2244

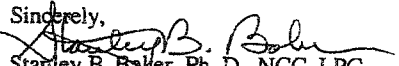
September 12, 2003

Ms. Pam J. Matthews
University of Arkansas
P.O. Box 1002
Fayetteville, AR 72702

Dear Ms. Matthews,

Thank you for requesting permission to modify and use the Counselor Self-Efficacy scale of which I am the author. You have my permission to proceed. Please send me a copy of the additions/modifications that you make, either electronically. My mailing address is 520 Poe Hall, Box 7801, North Carolina State University, Raleigh, NC 27695-7801.

Sincerely,


Stanley B. Baker, Ph. D., NCC, LPC
Professor of Counselor Education
919/515-6360; Stanley_Baker@ncsu.edu

Appendix C

Instructions Without Web-Based Format For CSES

Counselor Self-Efficacy Scale

(Baker, 1989)

Directions and Items Modified for Situation-Specific Research

(Matthews, 2003)

Directions:

Listed below are 33 counseling behaviors. Imagine that you are about to sit down and counsel a client in a helping relationship where that person expects you to provide professional counseling for him/her, which includes his/her discussion of religious and/or spiritual issues within his/her life. You are ethically aware that you must not try to change or influence any clients' beliefs or orientation with regards to religion/spirituality.

Please go through the list, think about your level of confidence in your ability to perform each counseling behavior and place a number in the blank below the item indicating the degree of confidence in your ability to successfully perform each behavior.

Use the following scale to make your ratings.

0	1	2	3	4	5	6	7	8	9	10
No Confidence				Moderate Confidence				Complete Confidence		

You must use one of the numbers listed above (i.e., 0, 1, 2, 3, etc.) to make your ratings.

Notice that all ratings after "0" represent increasing levels of confidence.

Appendix D

Permission to use the Psychomatrix Spirituality Inventory (PSI)

From Drwolman@aol.com
Sent Saturday, July 26, 2003 10:53 am
To pjmatth@uark.edu
Cc
Bcc
Subject Re: Psychometric Spirituality Inventory

Hello Pam,

I would be glad to have you use the PSI in your research. Could you send me a copy of your research outline, abstract or other detailed summary of what you are planning.

Dr. Wolman

September 30, 2003

Richard N. Wolman, Ph.D.
59 Church St.
Cambridge, MA 02138

Dear Dr. Wolman,

I am a doctoral student at the University of Arkansas, working on a Ph.D. in Counselor Education. In my research, I located the PsychoMatrix Spirituality Inventory (PSI). The PSI seems to be an instrument that would assist me in gathering information for my dissertation. My study will survey Master's level counseling and social work students to consider relationships between spirituality levels and self-efficacy in counseling clients with religious or spiritual issues.

Please accept this letter as a formal request to use the PSI in my study.

At this time, I am considering an on-line survey, but may have to go to a paper survey due to costs and the use of two surveys. Keeping surveys together will insure participants' completion of both surveys consecutively and less chance of data loss.

I would be happy to share data with you in exchange for the use of the PSI.
Thank you for your consideration. Please contact me if you have further questions.

Sincerely,
Pam J. Matthews, ACSW, LCSW
pjmatth@uark.edu

Appendix D (Continued)

Richard N. Wolman, Ph.D.

59 Church Street

Cambridge, MA 02138

Ph: 617-492-6333

email: drwolman@aol.com

November 11, 2003

Pam J. Matthews

P. O. Box 1002

Fayetteville, AR 72702

Dear Ms. Matthews,

Thank you for your interest in using the PsychoMatrix Spirituality Inventory in your research. I am pleased to give you permission to use the instrument, including the on-line application for your work. In exchange I request your sharing the data and findings in order to further the overall development and usefulness of the instrument.

Good luck with your research.

Sincerely,



Richard N. Wolman, Ph.D.

President, PsychoMatrix

Appendix E

PSI Scoring for the Seven Factors by Gender

Psychomatrix Spirituality Inventory

FACTOR SCORING

(Wolman, 2001)

<http://www.psychomatrix.com>

At the broadest level, spirituality was described in terms of seven basic dimensions or factors. PSI scores on these factors were generated from participant responses and provide estimates of each of the seven factors.

FACTOR ONE. DIVINITY

Item	2	9	17	28	34	44	52
Score							

Total Score = _____

Total score divided by 7 = _____

Divinity Factor Score = _____

Divinity Factor Score	Low	Moderate	High
Male	less than 2.2	2.3 to 2.8	2.9 or more
Female	less than 2.5	2.6 to 3.1	3.2 or more

HIGH SCORES

Individuals who obtain a high score on Divinity demonstrate a strong awareness of and connection to a Higher Being or Divine Presence, often when experiencing the beauty and power of nature. Such individuals report a feeling of closeness to God, praying at specific times of the day, and being comforted by blessings. They also report having had their prayers answered, and using angels for guidance. A high score may also indicate a strong commitment to praying for the recovery of a loved one; and less faith in scientific

Appendix E (Continued)

explanations in confusing life situations. High scorers are convinced that humans are here for a purpose and often report having experienced miracles.

MODERATE SCORES

Individuals who obtain a moderate score on Divinity demonstrate an awareness of and connection to a Higher Being or Divine Presence. Individuals who obtain a moderate score on Divinity may take a pragmatic approach to life, with less reliance upon a Higher Being for peace of mind. For example, these individuals may deeply appreciate the power and beauty of nature without reference to or awareness of a Divine Presence. Such people feel mostly reliant upon themselves, family and friends for support and nurturance in times of calm or crisis. They may find themselves praying for the recovery of a loved one, but relying as much on scientific knowledge as faith for healing. Moderate scorers include a naturalistic view in their ideologies, rather than being convinced that humans are here for a purpose.

LOW SCORES

Individuals who obtain a low score on Divinity demonstrate a pragmatic approach to life, with less reliance upon any form of Higher Being for peace of mind. For example, these individuals may deeply appreciate the power and beauty of nature without reference to or awareness of a Divine Presence. Such people feel mostly reliant upon themselves, family and friends for support and nurturance in times of calm or crisis. These individuals tend to rely primarily on scientific explanations for illness and catastrophic events. Low scorers are often naturalistic in their ideologies, rather than being convinced that humans are here for a purpose or that life is part of a divine, unseen and unknowable plan.

Appendix E (Continued)

FACTOR TWO. MINDFULNESS

Item	1	16	26	32	42	61	77
Score							

Total Score = _____

Total score divided by 7 = _____

Mindfulness Factor Score = _____

Mindfulness Factor Score	Low	Moderate	High
Male	less than 2.3	2.4 to 2.9	3.0 or more
Female	less than 2.6	2.7 to 3.2	3.3 or more

HIGH SCORES

Individuals who score high on Mindfulness set aside time for contemplation and self-reflection on a regular basis. They report that meditation has been a meaningful part of their lives, and may also practice yoga, tai chi and other relaxation techniques. In addition, such individuals often use alternative therapies such as acupuncture, aromatherapy or massage as part of their self care. High scorers on Mindfulness also pay close attention to the foods they eat and to the physical status of their bodies. Such people use a variety of foods to energize themselves or alter their internal physical balance to insure optimal functioning. A high score on Mindfulness indicates an individual who may be affiliative, i.e., feel the connectedness with and seek the company of others as an opportunity to share ideas and concerns. Possibly as a consequence of this interaction with others, high scorers tend to forgive themselves for their own failings and use their own ethical standards as a guide to action.

Appendix E (Continued)

MODERATE SCORES

Individuals who score in the moderate range on Mindfulness, sometimes set aside time for contemplation and self reflection, but not on a regular basis. They report that meditation has been a pleasurable experience, but they may also practice yoga, tai chi and other relaxation techniques. In addition, such individuals may sometimes use alternative therapies such as acupuncture, aromatherapy or massage as part of their self care.

Moderate scorers on Mindfulness pay attention to the foods they eat and to the physical status of their bodies. Such people use a variety of foods to energize themselves, or alter their internal physical balance to insure optimal functioning. A moderate score on Mindfulness indicates an individual who is somewhat affiliative, i.e., feels the connectedness with and seeks the company of others as an opportunity to share ideas and concerns. Part of this relatedness to others leads these individuals to include their own ethical standards in guiding their actions. They also can experience self-forgiveness for their own failings.

LOW SCORES

Individuals who score in the low range on Mindfulness rarely set aside time for contemplation or self-reflection. They report that meditation may be a pleasurable experience, but they may also practice yoga, tai chi and other, more conventional relaxation techniques such as walking, hiking and other forms of exercise. In addition, such individuals occasionally use alternative therapies such as acupuncture, aromatherapy, or massage but more out of curiosity or novelty than as a regular part of self care. Low scorers on Mindfulness are not particularly attentive to, or concerned with,

Appendix E (Continued)

the foods they eat or to the physical status of their bodies. Such people use foods to energize themselves, independent of their internal physical balance. A low score on Mindfulness also indicates an individual who has strong affiliative needs, and pursues a sense a connectedness in the company of others as a way of sharing ideas and concerns. Such individuals tend to be less comfortable pursuing their own activities in a solitary fashion. Low scorers often guide their actions with their own ethical standards and experience self-forgiveness for their own failings, while simultaneously experiencing the support of friends and family.

FACTOR THREE. EXTRASENSORY PERCEPTION

Item	19	25	48	55	60	65	78
Score							

Total Score = _____

Total score divided by 7 = _____

Extrasensory Perception Factor Score = _____

Extrasensory Perception Factor Score	Low	Moderate	High
Male	less than 1.3	1.4 to 1.9	2.0 or more
Female	less than 1.7	1.8 to 2.3	2.4 or more

HIGH SCORES

Individuals who obtain a high score on Extra Sensory Phenomena often demonstrate a range of experience that encompasses knowledge outside conventional ways of knowing. They often have the experience of receiving phone calls from someone they were just thinking about, and sensing some event is about to occur just before it does. High scores on Extra Sensory Phenomena sense the presence of loved ones who are no longer living.

Appendix E (Continued)

and report having conversations with those individuals. A high score on Extra Sensory Phenomena is also correlated with reports of out-of-body experiences and the experience of past lives.

MODERATE SCORES

Individuals who obtain a moderate score on Extra Sensory Phenomena sometimes demonstrate a range of experience that encompasses knowledge outside conventional ways of knowing. Occasionally, they will receive phone calls from someone they were just thinking about or sense that an event is ready to occur just before it does.

Moderate scorers on Extra Sensory Phenomena might, under highly charged conditions, sense the presence of loved ones who are no longer living, or even have an internal conversation with that person.

LOW SCORES

Individuals who obtain a low score on Extra Sensory Phenomena rarely demonstrate a range of experience that encompasses knowledge outside conventional ways of knowing. They almost never report receiving phone calls from someone they were just thinking about, or sense that an event is about to occur just before it does. Low scorers on Extra Sensory Phenomena use their intellect and capacity for new knowledge in conventional, pragmatic but often highly effective ways. They might, under highly charged conditions, briefly sense the presence of loved ones who are no longer living, but do not report having any sort of internal conversation with that person.

Appendix E (Continued)

FACTOR FOUR. COMMUNITY

Item	3	20	30	50	56	68	76
Score							

Total Score = _____

Total score divided by 7 = _____

Community Factor Score = _____

Community Factor Score	Low	Moderate	High
Male	less than 1.4	1.5 to 1.9	2.0 or more
Female	less than 1.4	1.5 to 2.0	2.1 or more

HIGH SCORES

Individuals who score high on Community are actively involved with a wide variety of activities that include other people, either as mentors, friends, or the recipients of charitable activities such as the needy or homeless. High scorers attend religious services, consult with clergy or spiritual leaders and participate in classes, workshops and conferences concerning spirituality. They also look for spiritual consciousness in their professional caregivers such as doctors, lawyer, etc. In addition, those who score high on Community commit time to school, civic, and political activities, and report that they also devote time to a spiritual community.

MODERATE SCORES

Individuals who score in the moderate range on Community are sometimes involved with a variety of activities that include other people, either as mentors, friends, or the recipients of charitable activities such as the needy or homeless. Moderate scorers occasionally attend religious services, and may consult with clergy or spiritual leaders.

Appendix E (Continued)

They also tend to consider spiritual consciousness in their professional caregivers such as doctors, lawyers, etc. They might also seek out classes, workshops and conferences concerning spirituality, along with their other activities. Those who score moderate on Community spend some time with school, civic, and political activities, and report that they also give some time to a spiritual community.

LOW SCORES

Individuals who score in the low range on Community are seldom involved with the variety of activities that include other people, either as mentors, friends, or the recipients of charitable activities such as the needy or homeless. Low scorers rarely attend religious services, and do not consult with clergy or spiritual leaders. They also give little weight to the presence of spiritual consciousness in their professional caregivers such as doctors, lawyers, etc. They might seek out classes, workshops and conferences, but on issues other than spirituality, such as business, health, and the arts. Those who score low on Community tend not to spend time with school, civic, and political activities, or spiritual communities. Rather, they are comfortable with a smaller circle of friends or family, and pursue those activities which provide them with nourishment and pleasure in that context.

FACTOR FIVE. INTELLECTUALITY

Item	8	21	29	33	53	59	62
Score							

Total Score = _____

Total score divided by 7 = _____

Intellectuality Factor Score = _____

Appendix E (Continued)

Intellectuality Factor Score	Low	Moderate	High
Male	less than 2.3	2.4 to 2.9	3.0 or more
Female	less than 2.4	2.5 to 3.0	3.1 or more

HIGH SCORES

Individuals who score high on Intellectuality spend a good deal of time and energy reading about, discussing and studying dimensions of spirituality. Such people are intellectually curious and take pleasure in the mental activity associated with spiritual experience. High scorers ponder questions of the existence of higher powers, life, death, and the immortality of the soul. They also report thoughts about returning after death in a new life form, and are highly responsive to music, theater, and the arts. People who score high on Intellectuality discuss spirituality openly and are willing to actively question the teachings of traditional religion.

MODERATE SCORES

Individuals who score in the moderate range on Intellectuality like reading about, discussing and studying some of the dimensions of spirituality, but their areas of interest may be far-reaching. Moderate scorers sometimes address questions of the existence of higher powers, life, death and the immortality of the soul. They rarely report thoughts about returning after death in a new life form, but are reasonably responsive to music, theater and the arts. People who score in the moderate range on Intellectuality discuss spirituality openly and are willing to actively question the teachings of traditional religion.

Appendix E (Continued)

LOW SCORES

Individuals who obtain a low score on Intellectuality focus their intellectual activities on issues other than spirituality. Although they may be interested in learning and complex cognitive activity, their areas of interest may be far-reaching, but generally do not include the spiritual. Low scorers seldom address questions of the existence of higher powers, life, death and the immortality of the soul. Such individuals prefer dealing with life in the concrete here and now in a more practical approach to the world, and are marginally responsive to music, theater and the arts. People who score in the low range on Intellectuality tend to keep their thoughts about spirituality to themselves, and do not usually question the teachings of traditional religion.

FACTOR SIX. TRAUMA

Item	7	12	18	35	46	71	80
Score							

Total Score = _____

Total score divided by 7 = _____

Trauma Factor Score = _____

Trauma Factor Score	Low	Moderate	High
Male	less than 1.0	1.1 to 1.9	2.0 or more
Female	less than 1.3	1.4 to 2.1	2.2 or more

HIGH SCORES

A high score on Trauma indicates personal experience with physical or emotional pain and suffering. This experience can be the person's own, or witnessing the suffering of someone close. In some cases, a high score is correlated with a near death and out-of-body experience in which the individual leaves his or her body and then returns. High

Appendix E (Continued)

scorers on Trauma have usually had or observed more than one experience of significant illness or injury.

MODERATE SCORES

A moderate score on Trauma indicates some personal experience with physical or emotional pain and suffering. This experience can be the person's own, or witnessing the suffering of someone close. Moderate scorers on Trauma have usually had or observed an experience of significant illness or injury, such as a near death episode, but have sufficiently worked it through so that it no longer is in the forefront of consciousness. Individuals who score in the moderate range on Trauma may be highly sympathetic to the suffering of others, but have not been exposed to many of these types of experiences.

LOW SCORES

A low score on Trauma is correlated with the report of fewer than average personal experiences with emotional pain and suffering. This experience can be the person's own, or witnessing the suffering of someone close. Low scorers also tend to report few, if any, near death episodes or out-of-body experiences in which an individual leaves his or her body and then returns. Individuals who score low on Trauma may be highly sympathetic to the suffering of others, but simply not have been exposed to these types of experiences.

FACTOR SEVEN. CHILDHOOD SPIRITUALITY

Item	6	11	27	36	38	41	79
Score							

Total Score = _____

Total score divided by 7 = _____

Childhood Spirituality Factor Score = _____

Appendix E (Continued)

Childhood Spirituality Factor Score	Low	Moderate	High
Male	less than 1.4	1.5 to 2.1	2.2 or more
Female	less than 1.4	1.5 to 2.1	2.2 or more

HIGH SCORES

A high score on Childhood Spirituality is related to frequent and meaningful spiritual experiences early in life. These spiritual experiences often are of being read to (from books like the Bible, Koran, Bhagavad-Gita, Upanishads, or Tao Te Ching) by parents or grandparents. In addition, high scorers on the Childhood Spirituality factor attended religious services or religious schools as children, and frequently report that their parents or grandparents spoke often of God to them or in their presence.

MODERATE SCORES

A moderate score on Childhood Spirituality is related to a recollection of some meaningful spiritual experiences early in life. These spiritual experiences often are of being read to (from books like the Bible, Koran, Bhagavad-Gita, Upanishads, or Tao Te Ching) by parents or grandparents. In addition, moderate scorers on the Childhood Spirituality factor may have occasionally attended religious services or religious schools as children, and sometimes report having overheard their parents or grandparents speak to them of God or religious matters.

Appendix E (Continued)

LOW SCORES

A low score on Childhood Spirituality indicates a relative absence of religious experiences in childhood - either positive or negative in nature. These experiences include attending religious services as a child - usually in the company of parents; being read to (from books like the Bible, Koran, Bhagavad-Gita, Upanishads, or Tao Te Ching) by parents or grandparents; attending religious school; or having had conversations about God with parents and/or grandparents.

Appendix F

Instructions Without Web-Based Format for PSI

Psychomatrix Spirituality Inventory (Wolman, 2001)

The Inventory is designed to be descriptive and not evaluative. Your scores indicate your profile in relation to others who have taken the Inventory. It is based on your honest and spontaneous responses to the items.

Appendix G

Demographic form Without Web-Based Format

Demographic Information

Please answer each question as it pertains to you at this time.

Name of University: _____

Location: _____

I will complete my Master's degree in:

__ One year or less

Other: _____

Program Affiliation:

__ Counselor Education with emphasis in: _____

__ Social Work with emphasis in: _____

__ Rehab Counseling

__ Counseling Psychology

__ Other _____

Level of Experience:

__ Less than 3 years

__ 3-5 years

__ 6-8 years

__ 9-12 years

__ 13 years or more

Appendix G (Continued)

Gender:

☐ Male

☐ Female

Age:

☐ under 25 years old

☐ 25-30 years old

☐ 31-36 years old

☐ 37-40 years old

☐ 41-49 years old

☐ 50-plus years old

Ethnicity:

☐ Caucasian

☐ Non-Caucasian

Specify non-Caucasian Ethnicity:

☐ African American

☐ Native American

☐ Hispanic

☐ Multiracial

☐ International _____

☐ Other _____

Appendix G (Continued)

Religious Affiliation:

☐ Christian

☐ Non-Christian

Specify Religious/Spiritual Affiliation:

☐ Catholic

☐ Protestant _____

☐ Judaism

☐ Islam

☐ Hinduism

☐ Buddhism

☐ New Age

☐ Other _____

Other prior training or education in religion or spirituality:

Thank you for your participation in this survey. If you have any questions, concerns, or comments, or would like the results from the entire survey, please contact this researcher at: pjmatth@uark.edu

Should difficulties or concerns arise as a result of taking this survey, please consult your local counseling services or talk to your advisor for further referrals.

☐ Submit

Appendix H

Web-based Survey Instructions With Implied Consent

Thank you for participating in this research project. It has been designed for the study of Trainee levels of spirituality and self-efficacy in counseling clients with religious or spiritual issues. The information gained from this survey will assist in the continued training and development of graduates in counseling and counseling related fields.

Your decision to participate and submit information via this web-based survey program, serves as an implied consent for inclusion in this research. All information is kept in the strictest confidence. There will be no personal information identifying you in this survey. Please complete this survey in one sitting and make sure you click the checkbox next to the submit button at the end. Please do not submit before you have completed the survey, as your data will not be saved and you won't be able to return.

If you have any questions, concerns, or comments, please contact this researcher at pjmatth@uark.edu

Appendix I

Initial E-mail Correspondence with Professors and Invitation to Participants

Dear Professor:

I am a student at the University of Arkansas working on my dissertation for a Ph.D. in Counselor Education. I am starting my data collection and would appreciate your consideration in posting an informational invitation **to the student listserv** for your program or posting the attached information for the master's level students in your program. There are no anticipated risks or discomforts associated with participation in this study. My dissertation pertains to the relationship of spirituality levels and self-efficacy levels in trainees that will provide counseling for clients.

The **website** containing the survey is **listed below with a hyperlink** and will provide easy access for participants. For your convenience, you may choose to forward this entire e-mail, copy and paste only the invitation, or use the attached word document version to post to the student listserv.

My sample includes master's level **counseling and social work** students in CACREP and CSWE programs, **in their last year**, willing to volunteer to complete an online survey which will take approximately 20 minutes or less to complete. In return, the participating students and universities may request the results from the entire survey, which may assist in further education and training for the profession. There will be no identifying information of the students involved. **The research has been approved by the University of Arkansas Institutional Review Board, which insures that research involving people follows federal regulations.**

Appendix I (Continued)

I would appreciate a return e-mail letting me know when you posted the invitation and how many masters' level students may be graduating in one year or less. If you would like more information or there is another contact for your listserv, please contact me at the e-mail address below. Thank you for your consideration and involvement in this process. **Please accept my apologies for cross-postings.**

Researcher: Pam Matthews (pjmatth@uark.edu)

INVITATION

Dear Potential Participant:

I am a student at the University of Arkansas working on my dissertation for a Ph.D. in Counselor Education. If you are a **master's level student in your last year of training in counseling, counselor education, or social work**, you are invited to participate in this research. The online survey will take approximately 20 minutes or less to complete. In return, the participating student and university may request further information and the results from the entire survey, which may assist in further education and training for the profession. There will be no identifying information of the students included in the data used for this dissertation or results shared with interested parties. There are no anticipated risks involved.

My dissertation pertains to the relationship of spirituality levels and self-efficacy levels in trainees that will provide counseling for clients. You will **imply your consent for participation by clicking on the web address listed below to access and complete the survey**. All information you offer in the survey will be held in confidence, with no

Appendix I (Continued)

identifying information. You may request the overall results of the survey by e-mailing this researcher listed at the end of the survey.

WEBSITE:

https://www2.uark.edu/servlet/edu.uark.comp.survey.Main?survey_id=100089

BELOW ARE THE DETAILS OF MY RESEARCH

1. Psychomatrix Spirituality Inventory (Wolman, 2001) is an 80-item self-rated instrument that assesses the spiritual practice, focus, pattern, and experience of an individual's spirituality. The score is meant to show the emphasis placed on the particular dimensions of spirituality and is not used as judgment or evaluation.
2. Counselor Self-efficacy Scale (Baker, 1989) is a 33-item self-rated instrument measuring the level and strength of counseling efficacy related to the listed counseling behaviors.
3. Religion/Spirituality Awareness Survey (Matthews, 2003) consists of 11 self-rated questions designed to measure religious/spiritual awareness regarding: (a) specific affiliations of religion/spirituality terms, beliefs, rituals, and customs; (b) the level of training received in programs regarding religion/spirituality for self or clients; and (c) any courses in the participants' programs believed to offer specific training in dealing with religious/spiritual issues in counseling.
4. Demographics

Title of Dissertation

SPIRITUALITY AND SELF-EFFICACY IN COUNSELING AND SOCIAL WORK
TRAINEES

Appendix I (Continued)

Dissertation Director

Roy C. Farley, Ed.D.

Dissertation Committee

George S. Denny, Ph.D.

Cheryl Murphy, Ed.D.

Linda R. Morrow, Ph.D.

This research has been approved by the University of Arkansas Institutional Review Board, which insures that research involving people follows federal regulations.

If you would like any additional information, please do not hesitate to contact me.

Thank you for your involvement in this process.

Please accept my apologies for cross-postings. Pam J. Matthews (pjmatth@uark.edu)

Appendix J

Reminder E-mail to Professors and Second Invitation to Participants

Dear Professor:

Recently you received an e-mail requesting that you post an invitation on your listserv or within your program for master's level students that may graduate in one year or less. I am thankful for the many universities and students that have already completed the survey. This is a **reminder and request for one more posting** to give students that have not participated, **one more opportunity to be a part of this valuable research.**

I am a student at the University of Arkansas working on my dissertation for a Ph.D. in Counselor Education. There are no anticipated risks or discomforts associated with participation in this study. My dissertation pertains to the relationship of spirituality levels and self-efficacy levels in trainees that will provide counseling for clients.

For the **second posting**, the website containing the survey is listed below with a **hyperlink** and will provide easy access for participants. The **original invitation** is attached in a word document version to post to the student listserv if this is your first posting. **The survey will be closed on March 5, 2004.**

My sample includes master's level **counseling and social work** students in CACREP and CSWE programs, **in their last year**, willing to volunteer to complete an online survey which will take approximately 20 minutes or less to complete. In return, the participating students and universities may request the results from the entire survey, which may assist in further education and training for the profession. There will be no identifying information of the students involved. **The research has been approved by the University of Arkansas Institutional Review Board, which insures that research**

Appendix J (Continued)

involving people follows federal regulations.

If this is **your first posting** or you have not acknowledged your first posting, I would appreciate a return e-mail letting me know when you posted the invitation and how many masters' level students may be graduating in one year or less. If you would like more information or there is another contact for your listserv, please contact me at the e-mail address below. Thank you for your consideration and involvement in this process.

Please accept my apologies for cross-postings.

Researcher: Pam Matthews (pjmatth@uark.edu)

SECOND REMINDER/INVITATION

Dear Potential Participant:

Recently you were asked to participate in an online survey pertaining to the relationship of spirituality levels and self-efficacy levels in trainees that will provide counseling for clients. **If you have not participated**, please take about 20 minutes and complete this important survey that has the potential of offering useful information for the profession. **The survey will be closed on March 5, 2004.**

I am a student at the University of Arkansas working on my dissertation for a Ph.D. in Counselor Education. If you are a **master's level student in your last year of training in counseling, counselor education, or social work**, you are invited to participate in this research. In return, the participating student and university may request further information and the results from the entire survey, which may assist in further education and training for the profession. There will be no identifying information of the students included in the data used for this dissertation or results shared with interested

Appendix J (Continued)

parties. There are no anticipated risks involved.

You will **imply your consent for participation by clicking on the hyperlink below to access and complete the survey**. All information you offer in the survey will be held in confidence, with no identifying information. You may request the overall results of the survey by e-mailing this researcher listed at the end of the survey.

WEBSITE: [CLICK HERE TO OPEN THE SURVEY](#)

BELOW ARE THE DETAILS OF MY RESEARCH

1. Psychomatrix Spirituality Inventory (Wolman, 2001) is an 80-item self-rated instrument that assesses the spiritual practice, focus, pattern, and experience of an individual's spirituality. The score is meant to show the emphasis placed on the particular dimensions of spirituality and is not used as judgment or evaluation.
2. Counselor Self-efficacy Scale (Baker, 1989) is a 33-item self-rated instrument measuring the level and strength of counseling efficacy related to the listed counseling behaviors.
3. Religion/Spirituality Awareness Survey (Matthews, 2003) consists of 11 self-rated questions designed to measure religious/spiritual awareness regarding: a) specific affiliations of religion/spirituality terms, beliefs, rituals, and customs; b) the level of training received in programs regarding religion/spirituality for self or clients; and c) any courses in the participants' programs believed to offer specific training in dealing with religious/spiritual issues in counseling.
4. Demographics

Appendix J (Continued)

Title of Dissertation

SPIRITUALITY AND SELF-EFFICACY IN COUNSELING AND SOCIAL WORK
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This research has been approved by the University of Arkansas Institutional Review Board, which insures that research involving people follows federal regulations.

If you would like any additional information, please do not hesitate to contact me.

Thank you for your involvement in this process.

Please accept my apologies for cross-postings. Pam J. Matthews (pjmatth@uark.edu)

**SPIRITUALITY AND SELF-EFFICACY
IN COUNSELING AND SOCIAL WORK TRAINEES**

**Abstract of dissertation submitted in partial fulfillment
of the requirements for the degree of
Doctor of Philosophy
in Counselor Education**

By

**Pamela J. Matthews, B.S., M.R.E., M.S.W.
Mississippi College, 1978
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**May, 2004
University of Arkansas**

This abstract is approved by:

Dissertation Director:


Roy C. Farley, Ed.D.

Abstract

The purpose of this study was to explore the relationships of the counseling/social work trainee spirituality and religion/spirituality awareness to trainee self-efficacy in counseling clients with religious/spiritual issues or backgrounds. In addition, the study explored the influence of demographic variables on spirituality, religion/spirituality awareness, and self-efficacy including: (a) religious/spiritual affiliation (Christian, Non-Christian), (b) ethnicity (Caucasian, Non-Caucasian), (c) training/accreditation program affiliation, (d) gender, and (e) age.

Participants ($N = 423$) were invited to participate through e-mailed invitations to professors of all counseling and social work programs on a list of accredited programs. Social work students from programs accredited by the Council on Social Work Education (CSWE) and counseling students from programs accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP), that met the criterion of being master's students graduating in three semesters or less were targeted for the study.

Three survey instruments were used in a web-based design: (a) Counselor Self-efficacy Scale (CSES; Baker, 1989), (b) Psychomatrix Spirituality Inventory (PSI; Wolman, 2001), and (c) Religion/Spirituality Awareness Survey (RSAS; Matthews, 2003). In addition, there was a demographic survey.

Results suggested that participants' awareness of religion/spirituality (RSAS) may have contributed to self-efficacy (CSES), which indicated confidence in performing the counseling behaviors in the measure specifically addressing religious/spiritual issues and/or backgrounds with a client in the counseling setting. Positive correlations were

apparent between awareness and spirituality with awareness accounting for more of the variance in spirituality than in self-efficacy. Participants with higher spirituality and awareness tended to present with higher self-efficacy.

Relationships were found between many of the demographic variables and trainee self-efficacy (CSES), spirituality (PSI Total Factor Score, each of the seven Factors), and religion/spirituality awareness (RSAS). The nature of the relationship between age and the measures revealed a positive linear trend. A quadratic trend was revealed between age and Extrasensory Perception with the downward curve beginning in the 37-40 age group.

Findings in this study suggested the importance and positive influence of implementing more training in counseling and social work education that may increase self-efficacy in trainees for dealing with religion/spirituality within the counseling setting.

